



PATIENT

Sparky Rodriguez

SPECIES

Canine

BREED

Chihuahua

SEX

Male Neutered

AGE

13 years

WEIGHT

9.56lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING

PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Specialty Services

REFERRING VET

Dr. Masloski

INVOICE

21378

DATE

10/6/21

PRESENTING CLINICAL SIGNS

History: Recheck echo. History chronic valvular disease - Stage 1 diagnosed on echocardiogram 11/9/20 (Tai Casagrande, DVM). Currently, has history of hypothyroidism with his most recent thyroid level elevated today. He has coughing fits with some occasional dyspnea. His appetite is good most of the time, but he does tend to be a bit lethargic. CV/RESP: NSR, grade IV/VI murmur with PMI left apical area radiating to right, PSS, lung fields clear. BP: 160mmHg x 4.

-Current medications: Thyroxine 0.1mg 1/2 tab twice a day *No sedation for study.

-Pertinent previous echo findings: LA 1.75 cm; LA:Ao 1.41; LV 1.73 cm; normal LA size; moderate-severe MR; mild TR with normal velocity (2.68 m/s).

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is normal with adequate myocardial function. LV wall thicknesses are normal.

Left atrium: The left atrium is mildly dilated.

Mitral valve: The mitral valve is diffusely thickened with mild prolapse into the left atrial lumen. Mild eccentric mitral regurgitation with a normal velocity.

Aortic valve/aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears mildly thickened with mild tricuspid regurgitation; velocity consistent with mild pulmonary hypertension.

Pulmonic valve/pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 130bpm.

2-Dimensional Measurements

Ao diam (cm)	1.3
LA diam (cm)	1.8
LA:Ao (Swe)	1.4
IVS thickness (cm)	0.6
LVID diastole (cm)	1.8
PW thickness (cm)	0.6
LVID systole (cm)	0.8
FS (%)	53

Doppler Measurements

PV Vmax (m/s)	0.75
AoV Vmax (m/s)	1.1
MR Vmax (m/s)	NM
TR Vmax (m/s)	3.3
TR PG (mmHg)	43

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease causing mild mitral and mild tricuspid regurgitation persists. The left heart disease is stable without significant progression in left heart dimensions or mitral regurgitation. The only abnormality identified is development of early pulmonary hypertension which is likely secondary to chronic respiratory signs in this patient. No additional issues are noted in this study.



PATIENT
Sparky Rodriguez

Given these findings, no medications are indicated. Continued assessment of progression in the future will help predict long term prognosis, which is highly variable at this stage (B1).

SPECIES
Canine

Given these findings, the cough is unlikely to be cardiac in origin and primary respiratory causes should be considered. Consider further respiratory work up/treatment (hydrocodone, taper course of steroids, Enrofloxacin, TTW/BAL, etc.).

BREED
Chihuahua

- RECOMMENDATIONS**
- Given these findings, no cardiac medications are clearly indicated.
 - Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
 - Anesthetic risk is considered mild if needed. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.
 - Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

SEX
Male Neutered

AGE
13 years

WEIGHT
9.56lbs

PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Specialty Services

REFERRING VET

Dr. Masloski

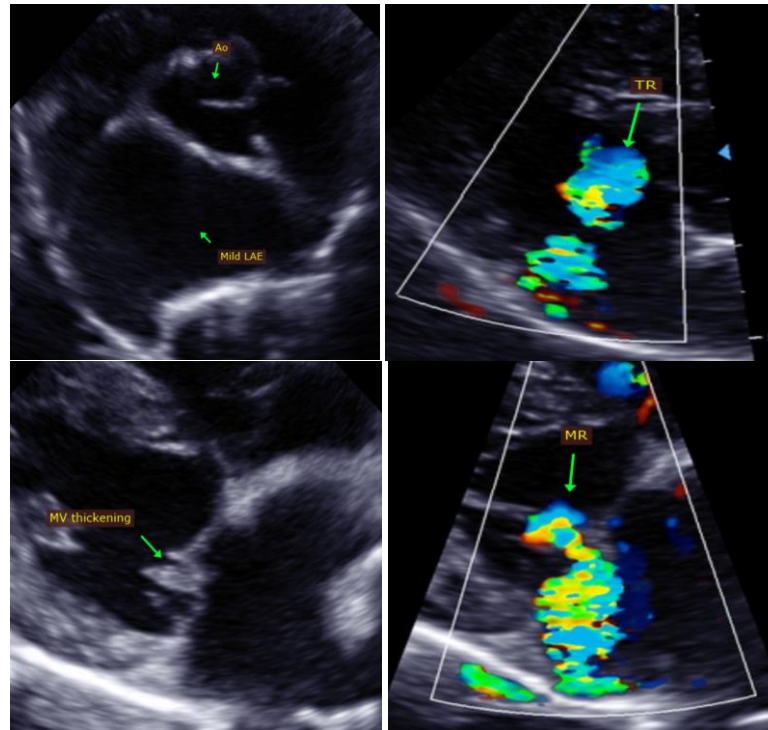
INVOICE

21378

DATE

10/6/21

IMAGES





PATIENT

Sparky Rodriguez

SPECIES

Canine

BREED

Chihuahua

SEX

Male Neutered

AGE

13 years

WEIGHT

9.56lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Specialty Services

REFERRING VET

Dr. Masloski

INVOICE

21378

DATE

10/6/21

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. This report was generated using transcription software, and minor dictation errors may be present. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

Echocardiogram performed by: Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)