



## PATIENT

Mya Bowen

## SPECIES

Canine

## BREED

Labrador Retriever

## SEX

FS

## AGE

10 y

## WEIGHT

92 lb

## INTERPRETED BY

Keith Blass, DVM, MS,  
DACVIM (Cardiology)

## IMAGING PERFORMED BY

Karen Ebersole, DVM,  
DABVP

## HOSPITAL NAME

Scanvet

## REFERRING VET

Dr. Balboni

## INVOICE

## DATE

11/11/25

## PRESENTING CLINICAL SIGNS

Grade 2-3/6 murmur. Radiographs showed mild cardiomegaly.

## ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

Left atrial size is normal. The mitral valve leaflets are mildly thickened, and a mild jet of mitral regurgitation is present. Left ventricular dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve appear normal, though trace aortic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

LA/Ao – 50.1 mm

LVIDd – 47.0 mm

LVIDs – 31.5 mm

FS – 33%

RA – 29.4 mm

LVOT – 1.35 m/s

RVOT – 1.03 m/s

## ELECTROCARDIOGRAPHIC FINDINGS

A six lead ECG is submitted for review.

HR: 140 bpm

Rhythm: Sinus

Normal sinus rhythm is present throughout this recording. The MEA is normal. All complex amplitudes and intervals are within normal limits. No premature beats or conduction blocks are seen.

## ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease – stage B1

This examination demonstrates mild regurgitation of blood across Mya's mitral valve resulting from degenerative valve disease. The hemodynamic effects of the regurgitation also appear to be mild, as Mya does not have secondary dilation of either of her left heart chambers, and her left ventricular systolic function is normal. As such, Mya's current risk for the development of clinical signs secondary to her mitral valve disease, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be low.

No abnormalities are appreciated in Mya's ECG.

No therapy is recommended at this stage of Mya's mitral valve disease.

A recheck echocardiogram is recommended in ~6 months to monitor for disease progression.



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

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Keith Blass, DVM, MS, DACVIM (Cardiology)

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