



## PATIENT

Molley Blauvelt

## SPECIES

Canine

## BREED

Poodle Mix

## SEX

FS

## AGE

9 y

## WEIGHT

21.4 lb

## INTERPRETED BY

Keith Blass, DVM, MS,  
DACVIM (Cardiology)

## IMAGING PERFORMED BY

Dr. Seth Mitchell

## HOSPITAL NAME

Mobile Veterinary  
Imaging

## REFERRING VET

Dr. Reece

## INVOICE

## DATE

11/12/25

## PRESENTING CLINICAL SIGNS

Grade 5/6 murmur. Radiographic cardiomegaly.

## ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

There is moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. There is Doppler evidence of mitral regurgitation present. There is moderate to severe left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal, though there is mildly increased flow velocity in the ascending aorta. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal. The pulmonary artery and pulmonary valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

LA – 39.9 mm  
LA/Ao – 2.02  
LVIDd – 43.9 mm  
LVIDs – 22.9 mm  
FS – 47.9%  
RA – 20.6 mm  
LVOT – 2.27 m/s  
RVOT – 0.98 m/s

## ELECTROCARDIOGRAPHIC FINDINGS

A six lead ECG is submitted for review.

HR: 150 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 B2

This examination demonstrates regurgitation of blood across Molley's mitral valve resulting from degenerative valve disease. Secondary to her regurgitation, Molley has moderate dilation of her left atrium and moderate to severe dilation of her left ventricle, though her left ventricular systolic function is well-preserved. Given these findings, Molley is at fairly high risk for the development of clinical signs secondary to her mitral valve disease, such as coughing, exercise intolerance, syncope, and labored breathing, therefore, careful monitoring for these is recommended.

No abnormalities are appreciated in Molley's ECG.

I recommend starting Molley on pimobendan (2.5 mg BID), as this medication should help to slow the progression of her mitral valve disease.



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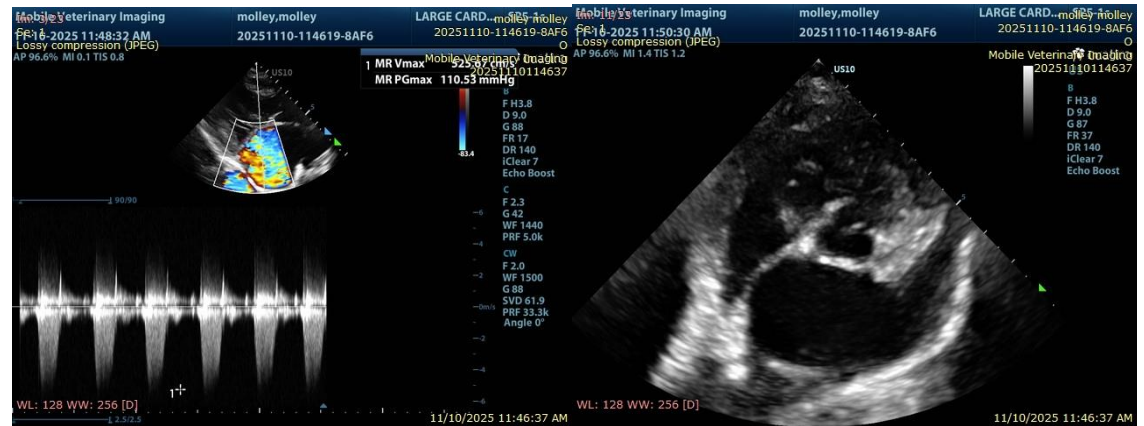
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A recheck echocardiogram is recommended in 6 months. Repeat thoracic radiographs are recommended if Molley experiences respiratory clinical signs.



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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