



PATIENT

Leo Morell

SPECIES

Canine

BREED

Toy Fox Terrier Mix

SEX

Male Intact

AGE

13 years

WEIGHT

7.94lbs

INTERPRETED BY

Maggie Machen Lamy, DVM DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Masloski

PRESENTING CLINICAL SIGNS

History: Recheck echo. History chronic valvular disease, advanced. Current presentation: Some whining/crying approximately one hour after receiving hycodan, although it does control his cough. Occasional heavy breathing. Good appetite. Restarted on Lasix in June due to coughing and an alveolar pattern noted in the perihilar region on chest films. The cough has improved with the Lasix. Currently only coughs when excited or waking up in the morning. CV/RESP: NSR, grade IV/VI murmur with PMI left apical area radiating to right, PSS, lung fields clear. BP: 130mmHg.

-Current medications, 1) Lasix/furosemide 12.5mg 1/2 tab twice a day 2) Pimobendan/vetmedin 0.94mg 1 capsule twice a day 3) Spironolactone 25mg 1/4 tab twice a day 4) Hydrocodone with homatropine/hycodan 5mg 1 tab twice a day.

-Pertinent previous echo findings (3/24/21 MML): LA 2.6 cm, LA/Ao 2.0, LV 3.17 cm, severe LAE, severe MR, mild-moderate TR(2.7 m/s), *Sedated with propofol for study.

ECHOCARDIOGRAM FINDINGS

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

Left ventricle: The LV diameter is mildly increased with hyperdynamic function. LV wall thicknesses are normal.

Left atrium: The left atrium is severely dilated.

Mitral valve: The mitral valve is diffusely thickened with prolapse into the left atrial lumen. Severe eccentric mitral regurgitation with an elevated normal velocity.

Aortic valve/Aorta: The aortic valve appears thickened with normal outflow velocity; laminar flow. Trace 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 septal prolapse and mild to moderate tricuspid regurgitation. Normal velocity.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. Trace 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 140bpm.

2-Dimensional Measurements

Ao diam (cm)	1.3
LA diam (cm)	2.3
LA:Ao (Swe)	1.8
IVS thickness (cm)	0.6
LVID diastole (cm)	2.9
PW thickness (cm)	0.6
LVID systole (cm)	1.5
FS (%)	48

Doppler Measurements

PV Vmax (m/s)	0.5
AoV Vmax (m/s)	0.9
MR Vmax (m/s)	4.7
TR Vmax (m/s)	2.3
TR PG (mmHg)	22

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease persists with evidence of relative stability. While severe, the quantity of MR and left heart enlargement is largely unchanged. Mild to moderate TR persists without significant pulmonary hypertension. No additional issues are identified.

INVOICE

22063

DATE

11/17/21



PATIENT

Leo Morell

Given these findings, no change to the medications is indicated at this time. The patient has reportedly developed CHF since the prior visit and Lasix should certainly be continued. Continue monitoring of sleeping breathing rates is recommended as the best way to screen for CHF at home.

SPECIES

Canine

RECOMMENDATIONS

- Continue Pimobendan, Spironolactone, Lasix, and Hydrocodone as prescribed.
- Monitor BP every 6 months, if >130mmHg institute ACE-I 0.5mg/kg PO q12h.
- Close monitoring for development of associated clinical signs (development of a progressive cough, labored breathing, exercise intolerance or worsening collapse episodes) is recommended.
- Monitoring of sleeping breathing rates is recommended as the best way to screen for CHF at home.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit. Mild activity restriction is advised.
- Elective anesthesia is not advised.

BREED

Toy Fox Terrier Mix

SEX

Male Intact

AGE

13 years

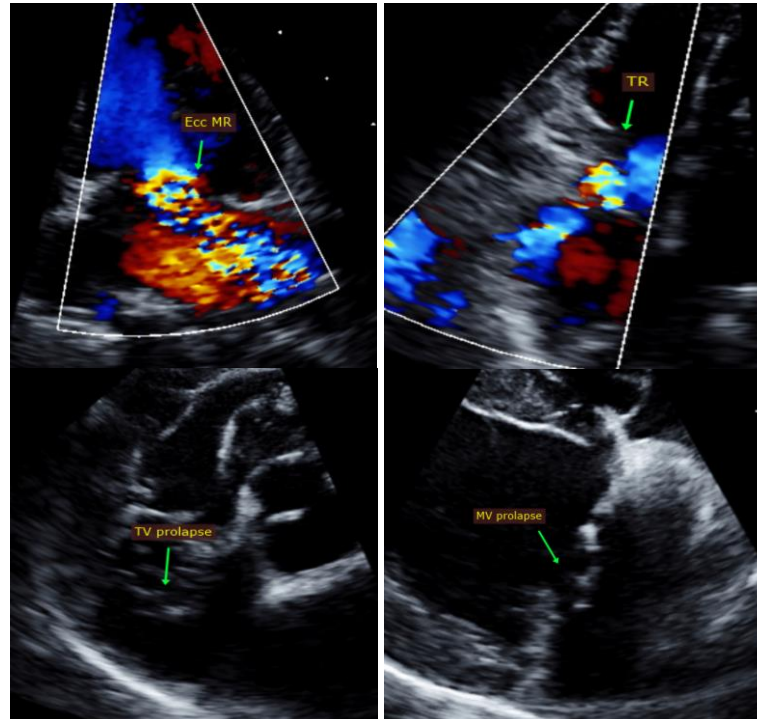
PLAN

- Recheck renal panel and BP every 4-6 months lifelong.
- Recommend conservative monitoring with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

WEIGHT

7.94lbs

IMAGES



INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Services

REFERRING VET

Dr. Masloski

INVOICE

22063

DATE

11/17/21



Mass Veterinary
Services



SonoPath
Clinical Sonography & Telectology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Leo Morell

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.

SPECIES

Canine

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.

BREED

Toy Fox Terrier Mix

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

SEX

Male Intact

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

AGE

13 years

WEIGHT

7.94lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Services

REFERRING VET

Dr. Masloski

INVOICE

22063

DATE

11/17/21