

PATIENT

Max Gentile

PRESENTING CLINICAL SIGNS

History: Atrial enlargement. Arrhythmia.
Echo findings (11/21/22 EL): CVD B2 with mild LAE and TR.

SPECIES

Canine

BREED

Chihuahua

SEX

Male Neutered

AGE

10 years

WEIGHT

11.28 lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

HOSPITAL NAME

Rockaway AH

HOLTER MONITOR FINDINGS AND RHYTHM ASSESSMENT

Time analyzed	23:59h
Mean heart rate	91bpm
Maximum heart rate	251bpm
Minimum heart rate	46bpm
VPCs	2 singles
APCs	169 singles

Interpretation: Underlying normal sinus rhythm with presumably appropriate rate variation (no diary provided). Isolated APCs; singles only. Two single VPCs. Occasional sinus pauses while presumably sleeping.

Rhythm diagnosis: Sinus rhythm with respiratory variation. Isolated APCs and rare VPCs (2).

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Atrial premature contractions (APCs) are identified as the cause of the arrhythmia. APCs are generated from abnormal conductive or fibrotic tissue in the atria of the heart muscle, and even frequent single APCs will often cause no clinical signs in dogs. When sustained however, supraventricular tachycardia can lead to symptoms such as lethargy and collapse. Two single VPCs are noted, which are of little clinical consequence or concern.

APCs are a very non-specific finding. They can be due to significant cardiac disease (CVD B2 present in this case) or be extra-cardiac in origin; ie due to pain, stress, inflammation, cancer, metabolic disease, etc. In this older dog with heart disease, development secondary to atrial dilation is suspected. Additionally, screening for systemic issues may also be considered (labs, AUS) in any senior dog.

Regardless of cause, no treatment for the APCs is indicated at this time as there is low risk for complication. Omega fatty acid supplementation is recommended in any arrhythmic patient.

Monitor for signs of sustained arrhythmias, such as acute lethargy or collapse.

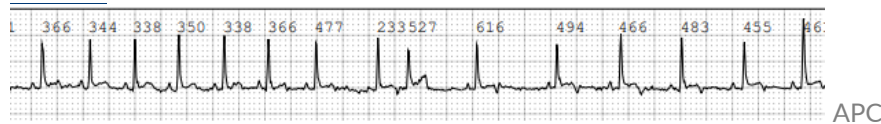
Plan: Recheck echocardiogram recommended as dictated by the echo report. . Consider systemic screening.

A recheck ECG and/or holter is recommended in 6 months, sooner if clinical signs arise.

IMAGES

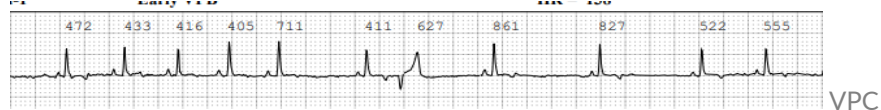
REFERRING VET

Dr. Ascot



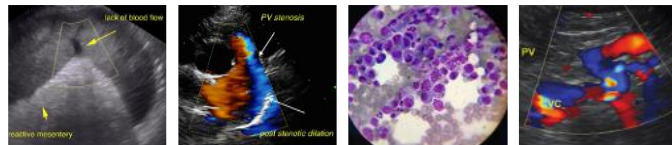
INVOICE

27622



DATE

11/23/22



PATIENT

Max Gentile

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

BREED

Chihuahua

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

SEX

Male Neutered

AGE

10 years

WEIGHT

11.28 lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

**IMAGING
PERFORMED BY**

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Ascot

INVOICE

27622

DATE

11/23/22