



PATIENT

Maya Perez

SPECIES

Canine

BREED

Yorkie Mix

SEX

FS

AGE

12 y

WEIGHT

15.7 lb

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Monroe Road AH

REFERRING VET

Dr. Widay

INVOICE

DATE

11/24/25

PRESENTING CLINICAL SIGNS

Recheck DMVD. Some vomiting episodes and increased respiratory effort at night.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study. This exam is compared to the one performed 2/17/25.

There is mild left atrial dilation. The mitral valve leaflets are mildly thickened and exhibit mild systolic prolapse. A moderate jet of eccentric mitral regurgitation is present. There is mild left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

ECG during echo: Sinus arrhythmia

LA – 29.0 mm (prev. 25.9 mm)
LVIDd – 29.8 mm (prev. 24.1 mm)
LVIDs – 14.2 mm (prev. 12.8 mm)
FS – 52.3% (prev. 46.9%)
RA – 15.9 mm (prev. 15.9 mm)
LVOT – 1.48 m/s (prev. 1.51 m/s)
RVOT – 0.93 m/s (prev. 0.86 m/s)
TR – 2.70 m/s

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

This examination demonstrates some progression of Maya's mitral valve disease over the past 9 months, and she now has mild secondary dilation of both her left atrium and left ventricle. As only mild left heart chamber dilation is present, it's unlikely that Maya's episodes of increased respiratory effort are secondary to her mitral valve disease, especially if the episodes are only episodic. Maya's current risk for the development of other clinical signs secondary to her mitral valve disease, such as coughing, exercise intolerance, and syncope, is mildly increased.

New to today's exam is mild regurgitation of blood across Maya's tricuspid valve. The hemodynamic effects of the regurgitation appear to be mild, and Maya's tricuspid valve disease appears to be well-compensated.

I recommend starting Maya on pimobendan (2.5 mg am, 1.25 mg pm), as this medication should help to slow the progression of her valvular diseases.

Thoracic radiographs are recommended if Maya experiences an increased respiratory effort again.

A recheck echocardiogram is recommended in 6-9 months to monitor for disease progression.



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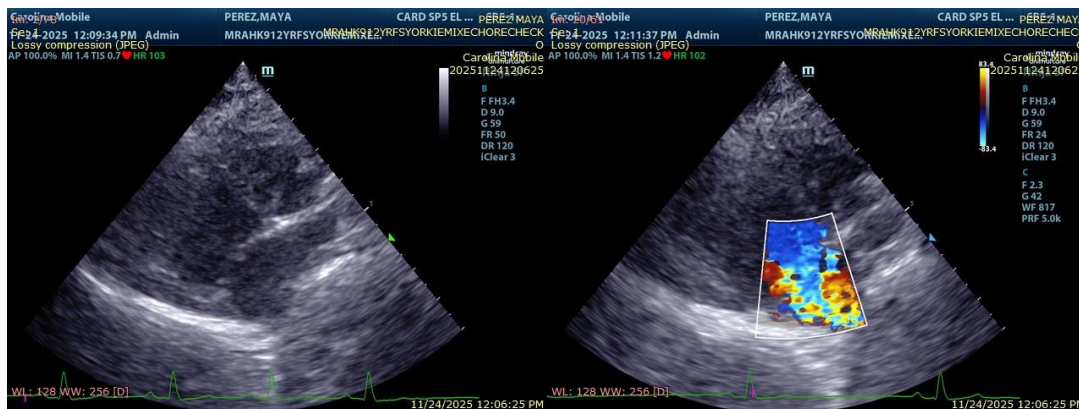
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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