



PATIENT

Paul Robinson

PRESENTING CLINICAL SIGNS

History: Recheck echo. Doing well.

-Current medications: Has been on Vetmedin 1.25mg.

SPECIES

Canine

-Abnormal PE/Chem/CBC/UA Results: Elevated Plateletcrit, high normal SDMA (14), elevated ALT (341), ALP (1737), GGT (40), T. Bilirubin normal, elevated cholesterol, lipase and amylase. T4 low normal - 12.

-Pertinent previous echo findings (8/2020 MML): Moderate MR, moderate LAE, mild LVE, trace/mild TR: 2.0. LA: 2.5, LV: 3.2, AV max: 1.1m/s.

BREED

Miniature Poodle

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Diffuse thickening of mitral valve leaflets (anterior>posterior) with minimal anterior leaflet prolapse into the left atrial lumen.

SEX

Male Neutered

Moderate eccentric mitral regurgitation with moderate left atrial dilation. Normal MR velocity. Mildly increased LV diameter with hyperdynamic myocardial function. The tricuspid valve appears mildly thickened, with trace/mild tricuspid regurgitation. Normal velocity. Normal right atrial and ventricular diameter. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities. No aortic and trival pulmonic insufficiency. No pericardial or pleural effusion noted. No cardiac tumors observed.

AGE

13 years

CARDIAC CHART

WEIGHT

18.7lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	6.0	2.0	1.4	1.8	48	90	0.25
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	NM	1.1	0.84	8.5	2.4	3.3	1.7
*Normal chamber parameters expressed as a mean value (SD)							
BODY WEIGHT DEPENDENT PARAMETERS							
*Note: All measurements based upon multi-modal images and methods. An average value is reported.							
Adapted from June Boon, Veterinary Echocardiography, 1998							
Rishniw M and Hollis NE, J Vet Intern Med 2000; 14:429-435							
Hansson et al, Vet Rad and Ultrasound 2002							
Bonagura et al. Echocardiography: principles of interpretation, Vet Clin North Am 15:1177, 1995							
				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
				10	1.50 (3.8)	3.27 (3.5)	2.06 (3.1)
				15	1.83 (2.0)	3.71 (2.4)	2.43 (2.1)
				20	2.02 (1.9)	4.14 (2.2)	2.80 (2.0)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)
				40	2.62 (5.2)	5.48 (6.1)	3.96 (5.4)
				50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)

HOSPITAL NAME

New Hamburg Vet
Clinic

REFERRING VET

Dr. Hunter

INVOICE

22222

DATE

11/30/21

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chronic degenerative valve disease persists with evidence of stability. Moderate mitral and trace/mild tricuspid regurgitation are unchanged and the left heart dimensions are stable. No additional issues are identified, such as pulmonary hypertension.



PATIENT

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Given these findings, continue Pimobendan as previously recommended. Continued assessment of progression in the future will help predict long term outcome, however prognosis is guarded at this stage (B2).

SPECIES

Canine

Omega fatty acid supplementation and mild salt restriction may also be of some long-term benefit. Monitor for development of a progressive cough, labored breathing, exercise intolerance or collapse episodes.

BREED

Minature Poodle

Anesthetic risk is considered mildly elevated. Cardiac protective drug choices (opioid/benzodiazepine premedication, Propofol or alfaxalone induction, iso or sevo gas) are recommended. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Judicious IV fluid rates are recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.

SEX

Male Neutered

AGE

13 years

PLAN

Baseline BP recommended every 6 months. Continue Pimobendan as previously recommended.

WEIGHT

18.7lbs

Recommend monitor for progression with a recheck echocardiogram in 6-8 months, sooner if any development of clinical signs.

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

IMAGING PERFORMED BY

Crystal Hill, RVT

HOSPITAL NAME

New Hamburg Vet
Clinic

REFERRING VET

Dr. Hunter

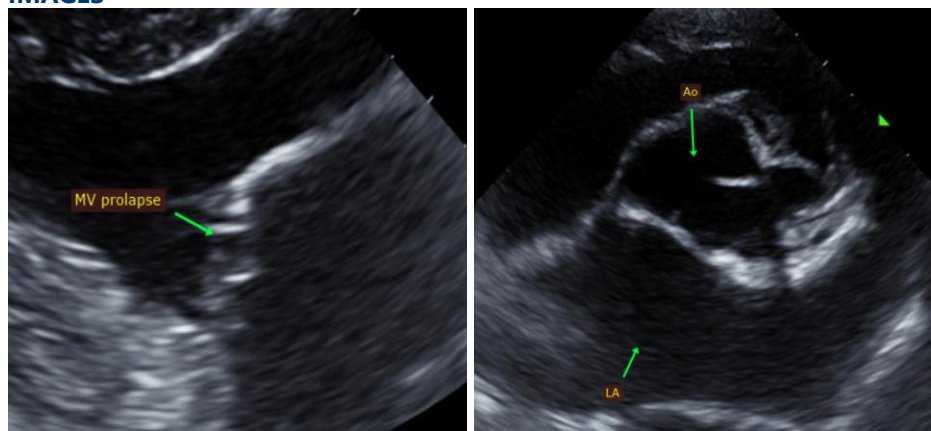
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IMAGES



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.

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.

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