

PATIENT

Rocky Santucci

SPECIES

Canine

BREED

Yorkie Mix

SEX

MN

AGE

13 y

WEIGHT

7.9 kg

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Beatties PH Stoney
Creek

REFERRING VET

Dr. Salib

INVOICE

DATE

11/4/25

PRESENTING CLINICAL SIGNS

Recheck degenerative valve disease.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study. This exam is compared to the one performed 5/30/25.

Left atrial size is normal. The mitral valve leaflets are mildly thickened, and a mild jet of eccentric mitral regurgitation is present. Left ventricular dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic valve appear normal, though trivial pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

LA - 29.1 mm (prev. 29.4 mm)
LVIDd - 29.2 mm (prev. 29.9 mm)
LVIDs - 16.0 mm (prev. 17.1 mm)
FS - 45.2% (prev. 42.8%)
RA - 18.5 mm (prev. 19.0 mm)
LVOT - 1.14 m/s (prev. 1.20 m/s)
RVOT - 0.96 m/s (prev. 1.02 m/s)

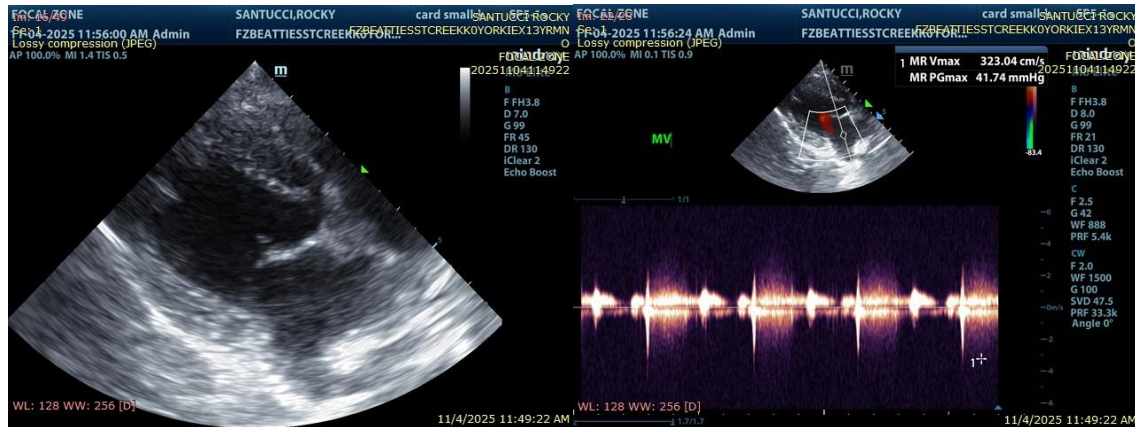
ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

This examination demonstrates no progression of Rocky's mitral valve disease over the past 5 months. As such, Rocky's current risk for the development of clinical signs secondary to his disease, such as coughing, exercise intolerance, syncope, and labored breathing, still appears to be low.

No therapy is recommended at this stage of Rocky's mitral valve disease.

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



The information and recommendations provided are based on the images presented by the referring



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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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