


PRESENTING CLINICAL SIGNS

History: Recent syncopal episodes. BP >200 mmHg. History of CKD, PLN, and arthritis. Currently receiving amlodipine and prednisone.

DATE

11/8/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, Doppler study.

PERFORMED BY:

Kelly Vazquez

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

There is borderline mild left atrial dilation. The mitral valve leaflets are mildly thickened and exhibit mild systolic prolapse. There is Doppler evidence of mitral regurgitation present. There is borderline mild left ventricular dilation. Left ventricular systolic function is normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and there is Doppler evidence of tricuspid regurgitation present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve are normal. No pericardial effusion or cardiac masses are seen.

 LA - 33.4 mm
 LVIDd - 33.2 mm
 LVIDs - 20.9 mm
 FS - 37%
 RA - 23.4 mm
 LVOT - 1.61 m/s
 RVOT - 1.15 m/s
 TR - 1.20 m/s

PATIENT

Abigail Hartman

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

BREED

Mixed

This examination demonstrates regurgitation of blood across Abigail's mitral and tricuspid valves resulting from degenerative valve disease. Abigail's tricuspid valve disease is mild, and appears to be well-compensated at this time. Her mitral valve disease is slightly more advanced, as Abigail has borderline mild secondary dilation of both her left atrium and left ventricle, though her left ventricular systolic is well-preserved. As only borderline mild left heart chamber dilation is present, Abigail's mitral valve disease appears to be well-compensated, and it's unlikely to be the cause of her collapsing episodes. It's possible that Abigail's systemic hypertension could be the cause, though consideration should also be given to vasovagal syncope and an arrhythmia.

SEX

FS

I recommend starting Abigail on pimobendan (3.75 mg am, 2.5 mg pm), as this medication should help to slow the progression of her valvular diseases, as well as decrease her risk for syncope secondary to her mitral regurgitation.

AGE

13 y

An ECG and/or Holter/event monitor is recommended if Abigail continues to experience syncopal episodes. A recheck echocardiogram is recommended in 9 months. Thoracic radiographs are recommended if Abigail experiences respiratory clinical signs.

WEIGHT

26 lb

HOSPITAL NAME

Ho-Ho-Kus VH

REFERRING VET

Dr. Scott



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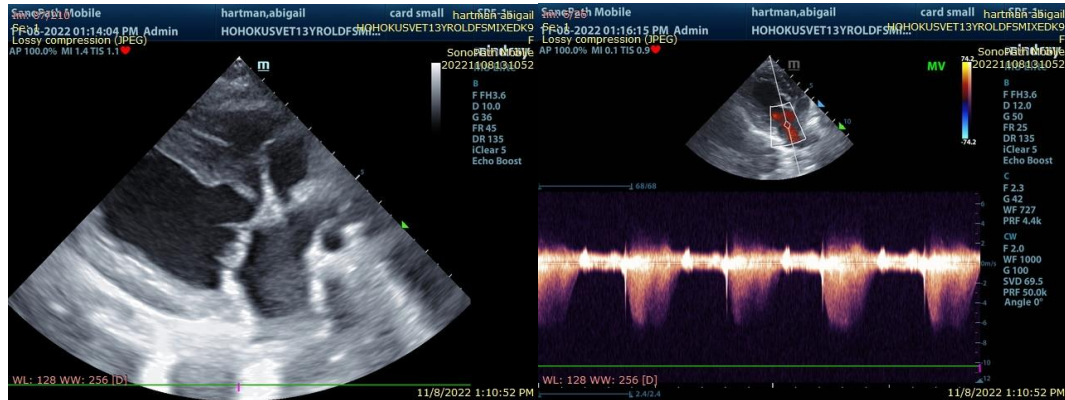
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. 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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