



PATIENT

Clyde Anstett

SPECIES

Canine

BREED

Petit Basset Griffon
Vendéen

SEX

Male Neutered

AGE

10 years

WEIGHT

40.9lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Services

REFERRING VET

Dr. Masloski

INVOICE

27961

DATE

12/13/22

PRESENTING CLINICAL SIGNS

History: Clyde was recently noted to have an enlarged heart on his chest films when he was anesthetized for a lip mass removal (melanoma). Some coughing on and off which is normal for him but seemed to have increased. Clyde is eating well with a good activity level. On exam: NSR, no murmurs, PSS, lung fields clear. BP: 160-170mmHg. *No sedation for study.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is normal with adequate myocardial function. LV wall thicknesses are normal.

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is mildly thickened with no prolapse into the left atrial lumen. Trace central MR.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity depending on heart rate; laminar flow. No aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears normal with no tricuspid regurgitation.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 120bpm.

2-Dimensional Measurements

Ao diam (cm)	1.5
LA diam (cm)	2.7
LA:Ao (Swe)	1.1
IVS thickness (cm)	0.8
LVID diastole (cm)	3.5
PW thickness (cm)	0.8
LVID systole (cm)	2.4
FS (%)	31

Doppler Measurements

PV Vmax (m/s)	0.9
AoV Vmax (m/s)	1.8
MR Vmax (m/s)	NM
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

INTERPRETATION OF THE FINDINGS

Overtly normal cardiac structure and function. The overall dimensions are normal with no evidence of significant structural disease. Trace MR may suggest early valve disease and follow up is advised should a murmur be ausculted in the future. No additional issues are identified.

These findings would suggest cardiomegaly is a normal variant. These films should be used as a baseline for future comparison.

RECOMMENDATIONS

- No cardiac medications are clearly indicated.
- No cardiac contraindication for general anesthesia.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.



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PLAN

- Recommend conservative monitoring with a recheck echocardiogram should a murmur or signs of cardiac compromise be noted in the future.

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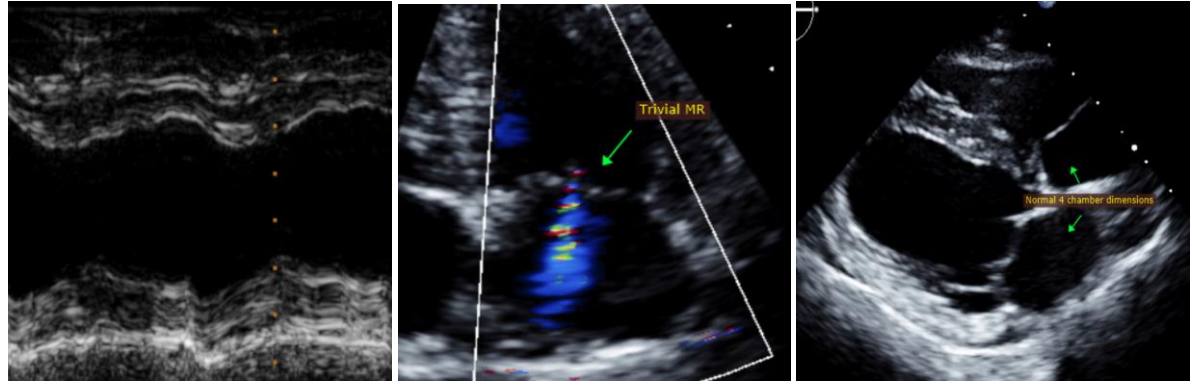
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IMAGES



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.

Maggie Machen Lamy, DVM

Diplomate of the American College of Veterinary Internal Medicine (Cardiology)

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Echocardiogram performed by:

Pamela Harrigan, RDCS

Pet Animal Ultrasound Service (4paus.com)

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