

DATE	PRESENTING CLINICAL SIGNS
12/20/21	History: Goose-honk cough for the past few months. Elicited with tracheal palpation. Grade 2/6 left apical systolic murmur.
PERFORMED BY:	ECHOCARDIOGRAPHIC FINDINGS
Potomac Mobile Veterinary Ultrasound	2D, M-mode, and Doppler study.
INTERPRETED BY	There is moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. A moderate jet of eccentric mitral regurgitation is present. There is moderate left ventricular dilation. Left ventricular systolic function is normal. The aorta and aortic appear normal, though there is mildly increased flow velocity in the ascending aorta. 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 appear normal, though trace pulmonic insufficiency is present. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.
Keith Blass, DVM, MS, DACVIM (Cardiology)	
PATIENT	LA - 42.4 mm
Buddy Stipe	LVIDd - 41.8 mm
	LVIDs - 24.1 mm
	FS - 42%
	LVOT - 1.58 m/s
SPECIES	RVOT - 0.84 m/s
Canine	TR - 2.05 m/s
	ASSESSMENT/RECOMMENDATIONS
BREED	Degenerative mitral and tricuspid valve disease
Sheltie	This examination demonstrates regurgitation of blood across Buddy's mitral and tricuspid valves resulting from degenerative valve disease. Buddy's tricuspid valve disease is mild, and appears to be well-compensated at this time. His mitral valve disease is more advanced, as Buddy has moderate mitral regurgitation present, with moderate secondary dilation of both his left atrium and left ventricle, though his left ventricular systolic function is well-preserved. Buddy's radiographs show that his mitral valve disease is still compensated, however, its severity indicates that he is at risk for the development of left-sided congestive heart failure, and careful monitoring of his respiratory rate/effort is recommended. As for Buddy's cough, it's likely that tracheal collapse is contributing to it, though it's likely that there is also a contribution from mainstem bronchial compression.
SEX	
MN	
AGE	
10 y	
WEIGHT	I recommend starting Buddy on pimobendan (5 mg am, 2.5 mg pm) and hydrocodone (3.75-5 mg PRN, up to every 6 hours). Should Buddy's cough persist, a trial with furosemide (12.5 mg BID) may be warranted.
27.4 lb	A recheck echocardiogram is recommended in 6 months. Repeat thoracic radiographs are recommended if clinical signs compatible with congestive heart failure develop.
HOSPITAL NAME	
Banfield Fox-Mill	
REFERRING VET	
Dr. Jarrett	



DATE

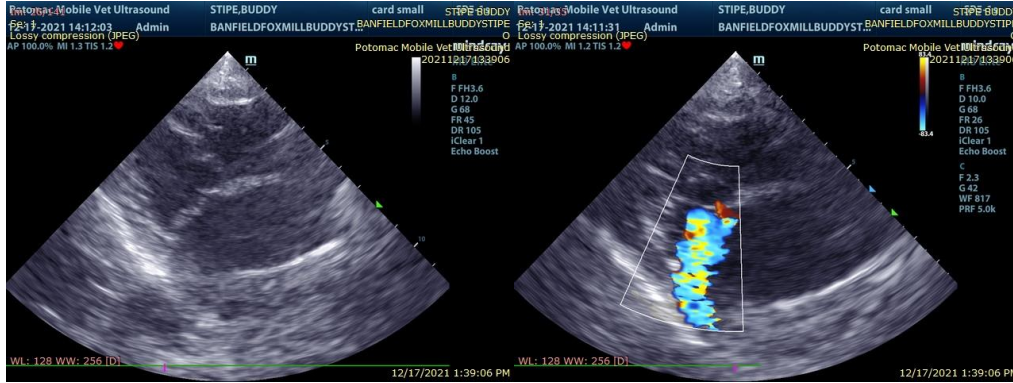
12/20/21

PERFORMED BY:

Potomac Mobile
Veterinary
Ultrasound

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)



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.

PATIENT

Buddy Stipe

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631-804-5754

SPECIES

Canine

BREED

Sheltie

SEX

MN

AGE

10 y

WEIGHT

27.4 lb

HOSPITAL NAME

Banfield Fox-Mill

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