


PRESENTING CLINICAL SIGNS

DATE History: Arrhythmia. BNP 2611. Pre-anesthetic evaluation (mammary mass removal).

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY: Left atrial size is normal. The mitral valve leaflets are mildly thickened, and a mild jet of 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 are normal. No shunting lesions are visualized. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.

Jenna Walsh, CVT

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA - 36.1 mm
LVIDd - 38.1 mm
LVIDs - 25.5 mm
FS - 33%
RA - 23.7 mm
LVOT - 1.05 m/s
RVOT - 0.65 m/s

PATIENT

Missoula Tellschow

ELECTROCARDIOGRAPHIC FINDINGS

A single lead ECG is submitted for review.

SPECIES

Canine

HR: 130 bpm
Rhythm: Sinus with ventricular ectopy

BREED

Bernese Mountain
Dog

The underlying rhythm is sinus in origin. All sinus complex amplitudes and intervals are within normal limits. There are occasional ventricular premature beats present. Following most of the premature beats are 1-2 beats of an idioventricular rhythm. No atrial ectopy or conduction blocks are seen.

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

SEX

Ventricular ectopy

FI

This examination demonstrates mild regurgitation of blood across Missoula's mitral valve resulting from degenerative valve disease. The hemodynamic effects of the regurgitation also appear to be mild, as Missoula does not have secondary dilation of either of her left heart chambers.

AGE

8 y

As such, Missoula's mitral valve disease appears to be well-compensated, and her current risk for the development of clinical signs secondary to it, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be low.

WEIGHT

80.74 lb

Missoula's ECG demonstrates the presence of occasional VPCs. Most of the VPCs are followed by 1-2 beats of an idioventricular rhythm before normal sinus rhythm returns. The arrhythmia seen in Missoula's ECG is fairly mild, however, it's possible that it could be worse intermittently, therefore, careful monitoring for the development of clinical signs of an arrhythmia, such as exercise intolerance and syncope is recommended.

HOSPITAL NAME

Balanced VC

Missoula's cardiovascular risk for general anesthesia is mildly to moderately increased based on these exams, therefore, some precautions are recommended in order to minimize this risk. I recommend avoiding the use of alpha-2 agonists, ketamine, telazol, and, if possible, anticholinergics in the anesthetic protocol, as well as reducing the IV fluid rate by 15%. Careful monitoring of Missoula's heart rhythm is recommended, and lidocaine (2 mg/kg slow IV) should be

REFERRING VET

Dr. Wright



available in case a significant ventricular arrhythmia develops.

DATE

12/26/22

No therapy is recommended at this stage of Missoula's mitral valve disease. No therapy appears to be indicated for her arrhythmia, however, consideration should be given to placement of a Holter monitor to determine a more accurate severity of the arrhythmia. Avoidance of high-intensity exercise is recommended.

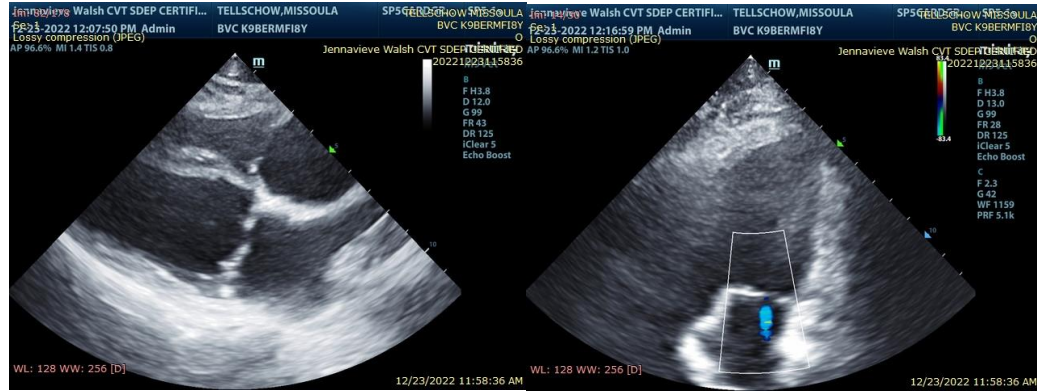
PERFORMED BY:

Jenna Walsh, CVT

A recheck echocardiogram and ECG are recommended in 6 months, sooner if new clinical signs compatible with cardiac dysfunction develop.

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(Cardiology)



PATIENT

Missoula Tellschow

SPECIES

Canine

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.

BREED

Bernese Mountain
Dog

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.

SEX

FI

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AGE

8 y

WEIGHT

80.74 lb

HOSPITAL NAME

Balanced VC

REFERRING VET

Dr. Wright