

**PATIENT PRESENTING CLINICAL SIGNS**

Shadow Sousa History: Cough with occasional discharge for 2 months, 3/6 murmur  
Medication: Pimobendan 1.25 BID, Lasix tapering dose

**SPECIES**

Canine

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**BREED**

Terrier Mix

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 hyperdynamic. The aorta and aortic are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No pericardial effusion or cardiac masses are seen.

**SEX**

Male Neutered

**AGE**

11 years

LA - 34.8 mm  
LVIDd - 33.3 mm  
LVIDs - 17.6 mm  
FS - 47%  
RA - 19.3 mm  
LVOT - 1.34 m/s  
RVOT - 0.89 m/s

**WEIGHT**

17.4 lbs

**ASSESSMENT/RECOMMENDATIONS**

Degenerative mitral valve disease

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM

This examination demonstrates moderate regurgitation of blood across Shadow's mitral valve resulting from degenerative valve disease. Secondary to his regurgitation, Shadow has moderate dilation of both his left atrium and left ventricle, though his left ventricular systolic function is well-preserved. Given the presence of moderate left atrial dilation, it's possible that mainstem bronchial compression could be contributing to Shadow's cough. Shadow's radiographs demonstrates no evidence of congestive heart failure, however, he is at risk for its development, therefore, careful monitoring of his respiratory rate/effort is recommended.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

Continued use of pimobendan is warranted based on this exam, though I recommend increasing Shadow's dose to 2.5 mg BID. As for furosemide, the medication can be continued (~1 mg/kg BID) if it has resulted in improvement in Shadow's cough.

**HOSPITAL NAME**

Maple Hills VH

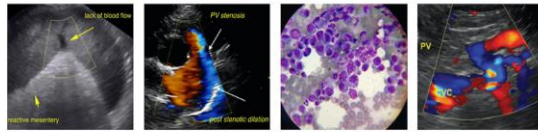
A renal profile is recommended in 1-2 weeks if furosemide is to be continued. A recheck echocardiogram is recommended in 9 months. Repeat radiographs are recommended if clinical signs compatible with congestive heart failure develop.

**REFERRING VET**

Dr. Eckman

**DATE**

12.3.2021



IMAGING PERFORMED BY  
PAMobileVet.com 443-794-4700

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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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