



PRESENTING CLINICAL SIGNS

History: Grade 3/6 murmur. VHS 11.5-12.

DATE

12/30/21

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Kim Liedberg

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve leaflets are mildly thickened, and a mild to moderate jet of eccentric mitral regurgitation is present. Left ventricular dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve appear normal, though trace aortic insufficiency is present. 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 appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Max Deutschendorf

LA - 43.6 mm
LVIDd - 40.4 mm
LVIDs - 27.3 mm
FS - 32.4%
LVOT - 1.75 m/s
RVOT - 1.18 m/s
TR - 2.50 m/s

SPECIES

Canine

BREED

Border Collie

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

This examination demonstrates mild to moderate regurgitation of blood across Max's mitral valve resulting from degenerative valve disease. The hemodynamic effects of the regurgitation appear to be mild, as Max does not have secondary dilation of either of his left heart chambers, and his left ventricular systolic function is normal. As such, Max's mitral valve disease appears to be well-compensated, and his current risk for the development of clinical signs secondary to it, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be low.

SEX

No therapy is recommended at this stage of disease.

MN

A recheck echocardiogram is recommended in 6 months to monitor for disease progression.

AGE

9 y

WEIGHT

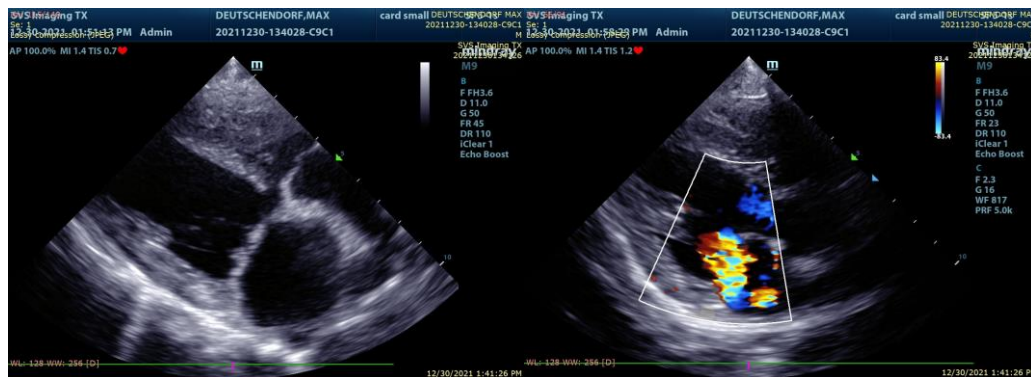
52 lb

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

Dr. Blessing



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.

DATE

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Keith Blass, DVM, MS, DACVIM (Cardiology)
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631-804-5754

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