



PRESENTING CLINICAL SIGNS

History: Grade III/VI left-sided murmur. Pre-anesthetic evaluation (dental).

DATE

12/6/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Shari Reffi, CVT

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

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 hyperdynamic. 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.

LA - 29.2 mm
LVIDd - 27.6 mm
LVIDs - 14.5 mm
FS - 47.4%
RA - 22.6 mm
LVOT - 2.02 m/s
RVOT - 1.25 m/s

PATIENT

Valentino Derosa

ASSESSMENT/RECOMMENDATIONS

SPECIES

Canine

BREED

Bichon Frise

Degenerative mitral valve disease

This examination demonstrates mild regurgitation of blood across Valentino's mitral valve resulting from degenerative valve disease. The hemodynamic effects of the regurgitation also appear to be mild, as Valentino does not have secondary dilation of either of his left heart chambers, and his left ventricular systolic function is well-preserved. As such, Valentino'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

MN

AGE

8 y

Valentino's cardiovascular risk for general anesthesia is mildly increased based on this exam, therefore, some precautions should be taken in order to minimize this risk. I recommend avoiding the use of alpha-2 agonists in the anesthetic protocol, as well as reducing the IV fluid rate by 25%. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

No therapy is recommended at this stage of Valentino's mitral valve disease.

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

WEIGHT

21 lb

HOSPITAL NAME

Banfield Bridgewater

REFERRING VET

Dr. Baker



DATE

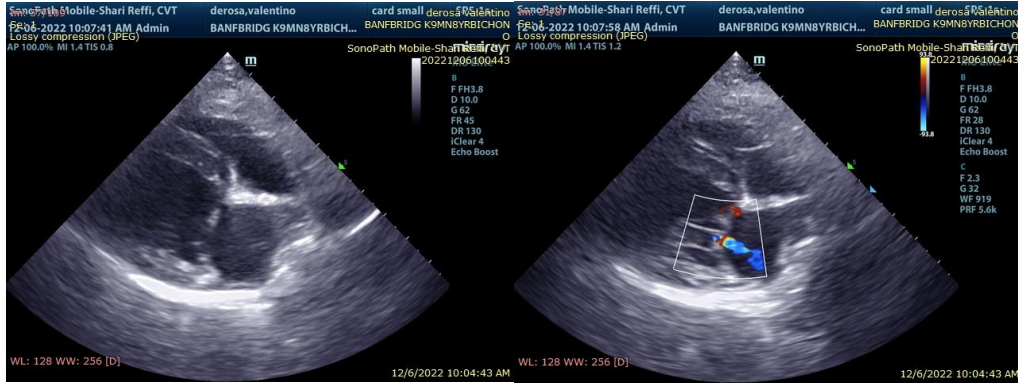
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

PATIENT

Valentino Derosa

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

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