


PRESENTING CLINICAL SIGNS

DATE History: Grade III-IV/VI left-sided murmur. Asymptomatic. Has been receiving furosemide 20 mg BID and enalapril 5 mg SID. Pre-anesthetic evaluation (dental). BUN 59, Cr 1.5, P 7.1, ALP 243.

12/7/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and color Doppler study.

PERFORMED BY:

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

There is mild left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. There is Doppler evidence of mitral regurgitation present. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. 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. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Peanut Pence

LA - 29.6 mm
LVIDd - 26.2 mm
LVIDs - 13.6 mm
FS - 48%
RA - 20.7 mm
LVOT - 1.01 m/s
RVOT - 0.89 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

BREED

Havanese Mix

This examination demonstrates regurgitation of blood across Peanut's mitral valve resulting from degenerative valve disease. Secondary to his regurgitation, Peanut has mild dilation of his left atrium, though his left ventricular dimensions are normal, and his left ventricular systolic function is well-preserved. As only mild left atrial dilation is present, Peanut's current risk for the development of clinical signs secondary to his disease, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be relatively low, though careful monitoring for these signs is recommended going forward.

SEX

MN

Peanut'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, ketamine, and telazol 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.

AGE

13 y

I recommend starting Peanut on pimobendan (2.5 mg BID), as this medication should help to slow the progression of his mitral valve disease, as well as decrease his risk for general anesthesia. As for Peanut's current therapy with furosemide and enalapril, continued use would be warranted if Peanut previously experienced clinical signs that improved with therapy.

WEIGHT

18 lb

A recheck echocardiogram is recommended in 9 months. Thoracic radiographs are recommended if Peanut experiences respiratory clinical signs.

HOSPITAL NAME

Swart Veterinary
Imaging

REFERRING VET

Dr. Swart



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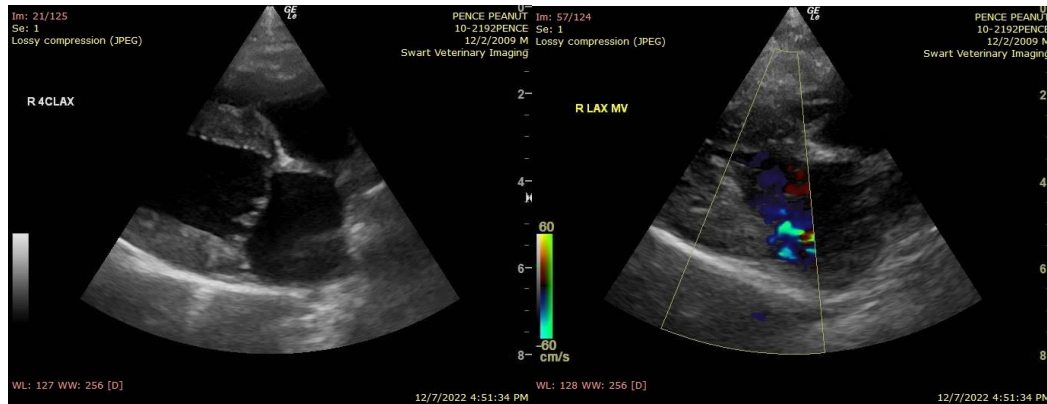
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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