

PATIENT PRESENTING CLINICAL SIGNS

Raven Arruda

Diagnosed with a grade I murmur at 1.5 years of age. Previous echo in 2019 diagnosed valve disease and mild PH. Murmur is now grade 2-3/6. Has been receiving pimobendan 2.5 mg BID and enalapril since August.

SPECIES

Canine

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

BREED

Boston Terrier

There is very mild left atrial dilation. The mitral valve leaflets are thickened and exhibit mild systolic prolapse. A mild to moderate jet of eccentric mitral regurgitation is present. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. The aorta and aortic are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.

SEX

FS

AGE

13 y

LA - 28.1 mm
 LVIDd - 24.2 mm
 LVIDs - 12.1 mm
 FS - 50%
 RA - 19.7 mm
 LVOT - 1.63 m/s
 RVOT - 1.47 m/s
 TR - 2.69 m/s

WEIGHT

17 lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

INTERPRETED BY

Keith Blass, DVM, MS
DACVIM(Cardiology)

This examination demonstrates regurgitation of blood across Raven's mitral and tricuspid valves resulting from her previously diagnosed degenerative valve disease. Raven's tricuspid valve disease is mild, and is well-compensated at this time. Her mitral valve disease is slightly more advanced, as Raven has mild to moderate mitral regurgitation present, with very mild secondary dilation of her left atrium, though her left ventricular dimensions are normal, and her left ventricular systolic function is well-preserved. As only very mild left atrial dilation is present, Raven's mitral valve disease appears to be well-compensated, and her current risk for the development of clinical signs secondary to her disease appears to be low.

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Pietsch

No evidence of pulmonary hypertension is seen in today's exam.

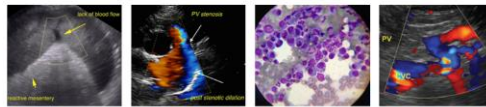
No change in therapy is recommended at this time.

INVOICE

A recheck echocardiogram is recommended in 9 months to monitor for disease progression.

DATE

12/9/21



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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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