



**PATIENT PRESENTING CLINICAL SIGNS**

Kaylee Fleming History: Recheck echo. Asymptomatic. Grade 5/6 heart murmur.  
 -Current medications: Pimobendan 2.5mg BID.  
 -Pertinent previous echo findings (9/2022 MML): Moderate MR, moderate LAE, mild LVE, no TR. LA; 3.0, LV: 3.5/1.6.

**SPECIES**

Canine

**BREED**

Cavalier

**SEX**

Female Spayed

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. Diffuse thickening of mitral valve leaflets (anterior>posterior) with mild prolapse into the left atrial lumen. Moderate to severe eccentric mitral regurgitation with moderate left atrial dilation. Normal MR velocity. Mildly increased LV diameter with hyperdynamic myocardial function. The tricuspid valve appears subjectively normal, with no significant tricuspid regurgitation. Normal right atrial and ventricular diameter. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities. Trace aortic and pulmonic insufficiency. No pericardial or pleural effusion noted. No cardiac tumors observed.

**AGE**

9 years

**CARDIAC CHART**

**WEIGHT**

19lbs

**INTERPRETED BY**

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

**IMAGING PERFORMED BY**

Karen Ebersole, DVM, DABVP

**HOSPITAL NAME**

Scanvet

**REFERRING VET**

Dr. Fortin

**INVOICE**

28714

**DATE**

2/1/23

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
<b>NORMAL PARAMETER</b>	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
<b>PATIENT</b>	5.5	NA	1.5	1.8	30	58	0.4
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	LVIDd Avg: 2D and m-mode short axis (cm)	LVIDs Avg: 2D and m-mode short axis (cm)
<b>NORMAL PARAMETER</b>	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
<b>PATIENT</b>	140	1.5	0.9	8.6	3.0	3.7	2.6
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
<b>BODY WEIGHT DEPENDENT PARAMETERS</b>				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
*Note: All measurements based upon multi-modal images and methods. An average value is reported.				10	1.50 (3.8)	3.27 (3.5)	2.06 (3.1)
				15	1.83 (2.0)	3.71 (2.4)	2.43 (2.1)
				20	2.02 (1.9)	4.14 (2.2)	2.80 (2.0)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)
				40	2.62 (5.2)	5.48 (6.1)	3.96 (5.4)
				50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Chronic degenerative valve disease persists with continued stability. The left heart dimensions are similar to previous with MR and TR. A small aortic leak has developed and a baseline BP is recommended. No additional issues are identified.

Given these findings, continue Pimobendan lifelong with no obvious indication for additional medications. Continued assessment of progression is recommended, with a guarded prognosis



**PATIENT**

Kaylee Fleming

(stage B2). Patient may be at risk for development of CHF, arrhythmias, and/or sudden death going forward.

**SPECIES**

Canine

Omega fatty acid supplementation and mild salt restriction may also be of some long-term benefit. Monitor for development of a progressive cough, labored breathing, exercise intolerance or collapse episodes.

**BREED**

Cavalier

Anesthetic risk remains mildly elevated. Cardiac protective drug choices (opioid/benzodiazepine premedication, Propofol or alfaxalone induction, iso or sevo gas) are recommended. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Judicious IV fluid rates are recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.

**SEX**

Female Spayed

**PLAN**

Baseline BP recommended every 6 months. Continue Pimobendan 0.25-0.3mg/kg PO q12h.

**AGE**

9 years

Recommend monitor for progression with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

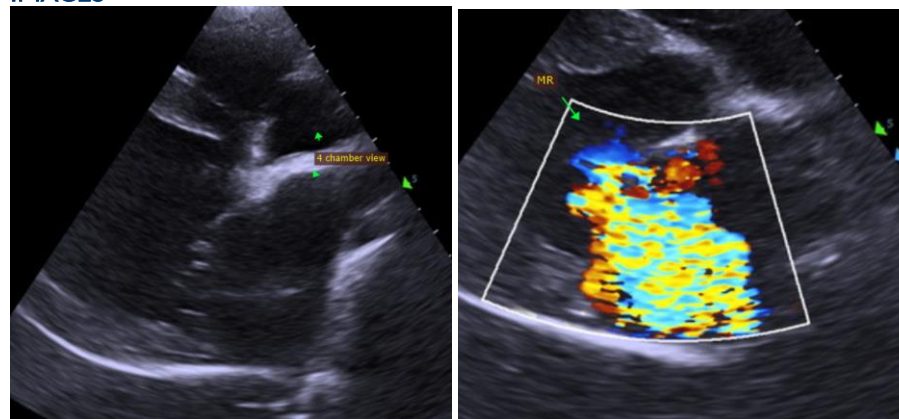
**WEIGHT**

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**IMAGES**

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)



**IMAGING PERFORMED BY**

Karen Ebersole,  
DVM, DABVP

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.

**HOSPITAL NAME**

Scanvet

Thank you for this referral. This report was generated using transcription software, and minor dictation errors may be present. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

**REFERRING VET**

Dr. Fortin

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