



PATIENT

Lily Colombrito

PRESENTING CLINICAL SIGNS

History: Collapse following exercise. Echo results (EL 2/22): NSF

SPECIES

Canine

BREED

Shih Tzu

HOLTER MONITOR FINDINGS AND RHYTHM ASSESSMENT

Time analyzed	23:58h
Mean heart rate	91bpm
Maximum heart rate	200bpm
Minimum heart rate	43bpm
VPCs	120 singles
APCs	0

SEX

FS

Interpretation: Underlying normal sinus rhythm with appropriate rate variation. Single pause (2.5s) while eating with a single blocked P wave consistent with high vagal tone. Sinus tachycardia with activity. Isolated VPCs; singles only.

AGE

2009

Rhythm diagnosis: Sinus rhythm with appropriate rate variation. Single pause during sleep.

WEIGHT

16 lbs

RECOMMENDATIONS

Two abnormalities are identified. First is isolated single VPCs, which are of unknown origin. Single ectopy does not cause clinical signs or hemodynamic compromise and no treatment is indicated. Given a normal echocardiogram, consider screening for systemic causes of VPCs through labs, AUS, etc.

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

A second abnormality is high vagal tone with a brief sinus pause/blocked P wave. High vagal tone is common in this breed, and may reflect a vasovagal event as the cause of the reported episode.

IMAGING PERFORMED BY

Given 2 abnormalities identified, it is difficult to know which (if either) was related to the episode. VT is possible with VPCs seen; however, this is rare in this signalment. A vasovagal event is more likely with brief sinus arrest. It is also possible that a potential cause of high vagal tone/VPCs is actually the cause of the episode- such as neurologic disease.

HOSPITAL NAME

Rockaway AH

Based upon the information that we have at this time no treatment is clearly indicated. If the patient has any future unexplained collapse episodes, the owner can attempt to obtain a heart rate during the episode. Alternatively, consider use of a mobile device such as an AliveCor (kardia), or referral for an event monitor in an attempt to correlate any potential heart rate changes.

If no episodes occur going forward, consider reassess the echocardiogram, ecg/holter in 6 months.

REFERRING VET

Dr. Maniar

IMAGES

INVOICE

22514

DATE

2/10/22



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Brief pause with AV block while eating

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.

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

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