



PATIENT

Ollie Hutchinson

SPECIES

Canine

BREED

Cockapoo

SEX

MN

AGE

11 y

WEIGHT

21 lb

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Maples AH

REFERRING VET

Dr. Kazienko

INVOICE

DATE

2/10/26

PRESENTING CLINICAL SIGNS

Recheck degenerative valve disease. Doing well, but has been coughing more recently, retching, and panting. Grade 5/6 murmur, arrhythmia. Receiving furosemide 10 mg SID, benazepril 5 mg BID, spironolactone 12.5 mg BID, and pimobendan 2.5 mg BID.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study. This exam is compared to the one performed 7/8/25.

There is moderate to severe left atrial dilation. The mitral valve leaflets are thickened and exhibit mild systolic prolapse. A moderate to severe jet of eccentric mitral regurgitation is present. There is moderate to severe left ventricular dilation. Left ventricular systolic function is mildly hyperdynamic. The aorta and aortic valve 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. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

LA - 38.4 mm (prev. 38.6 mm)
LVIDd - 36.8 mm (prev. 38.8 mm)
LVIDs - 20.7 mm (prev. 22.0 mm)
FS - 43.8% (prev. 43.3%)
RA - 18.4 mm (prev. 17.8 mm)
LVOT - 1.41 m/s (prev. 1.56 m/s)
RVOT - 1.17 m/s (prev. 0.91 m/s)

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

This examination demonstrates no progression of Ollie's valvular diseases over the past 7 months. While no progression has occurred, it is still possible that mainstem bronchial compression could be contributing to Ollie's cough given the continued presence of moderate to severe left atrial dilation. Ollie remains is also at relatively high risk for the development of labored breathing, exercise intolerance, and syncope, therefore, careful monitoring for this is recommended.

An ECG is recommended to evaluate for a pathologic arrhythmia.

No change in Ollie's current cardiac medications is recommended at this time. Should Ollie's cough be significant enough to warrant therapy, a trial with hydrocodone (2.5 mg PRN, up to every 6 hours) is recommended.

A recheck echocardiogram is recommended in 6-9 months. Thoracic radiographs are recommended if Ollie's cough does not improve or if he experiences labored breathing.



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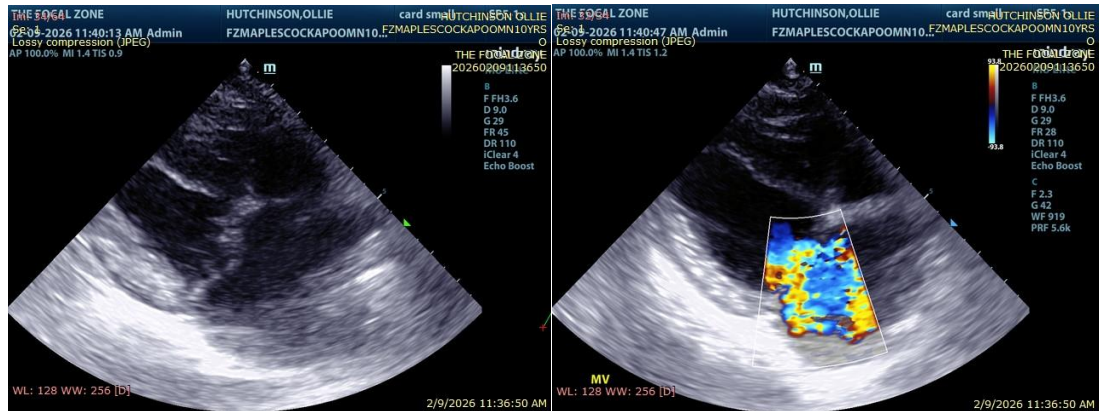
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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) info@SonoPath.com