



PATIENT
Simon Bustamante

PRESENTING CLINICAL SIGNS

History: Simon was noted to have a heart murmur in June 2021. He is presently doing well with a good appetite and activity level. On exam: NSR, grade III/VI murmur with PMI left apical area, PSS, lung fields clear, mm pink, moist, CRT<2. BP: 180mmHg. *No sedation for study.

SPECIES
Canine

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

BREED
Shih Tzu

Left ventricle: The LV diameter is normal with adequate myocardial function. LV wall thicknesses are normal.

Left atrium: The left atrium is normal.

SEX
Male Neutered

Mitral valve: The mitral valve is diffusely thickened with mild prolapse into the left atrial lumen. Moderate eccentric mitral regurgitation with a normal velocity.

Aortic valve/aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology.

Right atrium: Normal RA dimension.

AGE
13 years

Tricuspid valve: The tricuspid valve appears normal with mild tricuspid regurgitation. Velocity consistent with early pulmonary hypertension.

Pulmonic valve/pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

WEIGHT
16.25lbs

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 120bpm.

2-Dimensional Measurements

Doppler Measurements

INTERPRETED BY
Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

Ao diam (cm)	1.6
LA diam (cm)	2.0
LA:Ao (Swe)	1.3
IVS thickness (cm)	0.7
LVID diastole (cm)	2.8
PW thickness (cm)	0.7
LVID systole (cm)	1.7
FS (%)	39

PV Vmax (m/s)	0.6
AoV Vmax (m/s)	1.1
MR Vmax (m/s)	5.9
TR Vmax (m/s)	2.9
TR PG (mmHg)	34

IMAGING PERFORMED BY
Pamela Harrigan,
RDMS

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease causing moderate mitral and mild tricuspid regurgitation. Lack of significant left atrial enlargement indicates the current risk for complication is low. Early pulmonary hypertension is noted, which is of unknown significance in an asymptomatic dog. No additional issues are identified.

HOSPITAL NAME
Mass Veterinary Services

Assessment of progression in the future will help predict long term prognosis, which is highly variable at this stage (B1).

REFERRING VET
Dr. Masloski

RECOMMENDATIONS

- In an asymptomatic dog without significant left atrial enlargement, no cardiac medications are clearly indicated.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- Anesthetic risk is considered mild if needed. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane

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gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.

SPECIES
Canine

- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

BREED
Shih Tzu

PLAN

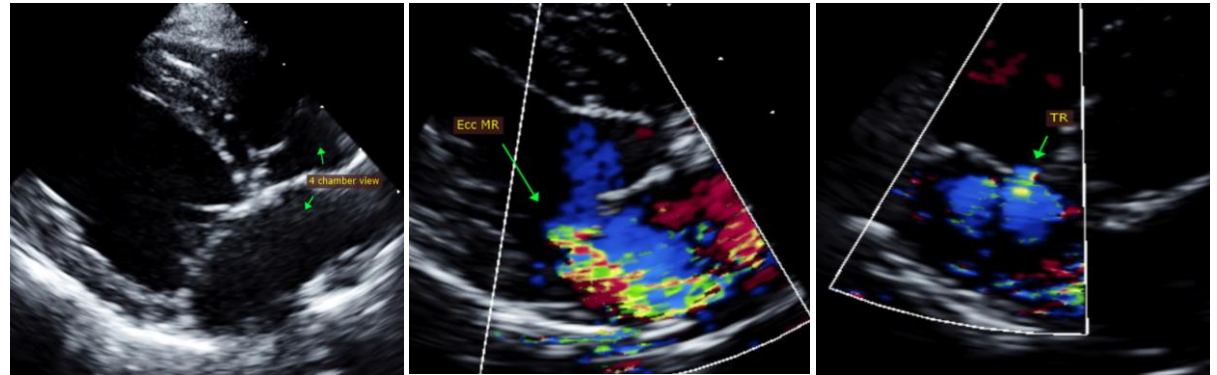
- Recommend conservative monitoring with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

SEX
Male Neutered

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WEIGHT
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IMAGES



INTERPRETED BY
Maggie Machen Lamy, DVM
DACVIM (Cardiology)

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. 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.

IMAGING PERFORMED BY
Pamela Harrigan, RDCS

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HOSPITAL NAME
Mass Veterinary Services

Echocardiogram performed by: Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)

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Dr. Masloski

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