



PATIENT

Echo Skenyon

SPECIES

Canine

BREED

Australian Cattle Dog

SEX

Male Neutered

AGE

14 years

WEIGHT

40.5lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

PRESENTING CLINICAL SIGNS

History: Recheck echo. History chronic valvular disease - Stage B1. Current presentation: Recently diagnosed bladder mass; surgery being considered. BRAF testing to be done. Echo is presently doing well with no C/S/V/D/PU/PD. He is eating well with normal activity. On auscultation: NSR, grade IV/VI murmur with PMI left apical area with mild radiation to right, PSS, lung fields clear. BP: 125mmHg x 4.

-Current medications: 1) Gabapentin 100mg 1 tab twice a day 2) Ursodiol 200mg 1 tab with food daily 3) Enalapril 5mg 1.5 tabs twice a day *No sedation for study.

-Pertinent previous echo findings (5/5/21 MML): LA 2.6 cm; LA:Ao 1.3; LV 4.0 cm; normal LA size; mild MR; mild TR (2.5 m/s; 25mmHg).

ECHOCARDIOGRAM FINDINGS

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

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

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is diffusely thickened with mild prolapse into the left atrial lumen. Mild eccentric mitral regurgitation with an elevated velocity.

Aortic valve/aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. Trivial aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears mildly thickened with septal prolapse and mild tricuspid regurgitation; normal velocity.

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.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 110bpm.

2-Dimensional Measurements

Ao diam (cm)	2.1
LA diam (cm)	2.6
LA:Ao (Swe)	1.3
IVS thickness (cm)	0.97
LVID diastole (cm)	3.9
PW thickness (cm)	0.92
LVID systole (cm)	2.5
FS (%)	37

Doppler Measurements

PV Vmax (m/s)	0.55
AoV Vmax (m/s)	1.2
MR Vmax (m/s)	6.9
TR Vmax (m/s)	2.2
TR PG (mmHg)	25

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Masloski

INVOICE

22607

DATE

2/16/22

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease persists with evidence of stability. Mild mitral and tricuspid regurgitation are unchanged without significant chamber enlargement. No additional issues are noted in this study and the disease remains mild overall.

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



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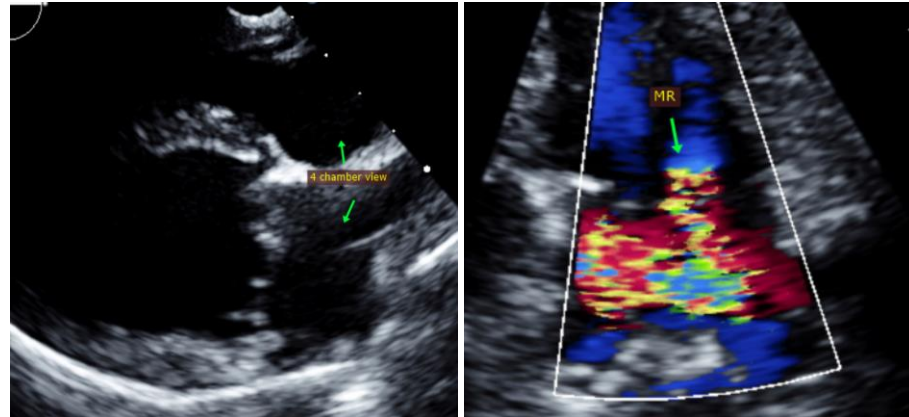
RECOMMENDATIONS

- Given these findings, no cardiac medications are clearly indicated.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- No cardiac contraindication for general anesthesia prior to chamber enlargement.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 6-12 months, sooner if any development of clinical signs.

IMAGES



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.

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