



PATIENT

Olivia Chaparro

PRESENTING CLINICAL SIGNS

History: Heart murmur III/VI. Coughing. Current meds: Vetmedin 1.25mg 1 tablet every 12 hours.

SPECIES

Canine

ECHOCARDIOGRAM FINDINGS

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

BREED

Maltese

Left ventricle: The LV diameter is borderline increased with hyperdynamic function. LV wall thicknesses are normal.

Left atrium: The left atrium is moderately dilated.

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

SEX

Female Spayed

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 indicating no overt evidence of pulmonary arterial hypertension.

AGE

8 years

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears mildly thickened with trace tricuspid regurgitation.

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

WEIGHT

13lbs

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

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

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

2-Dimensional Measurements

Ao diam (cm)	1.3
LA diam (cm)	2.4
LA:Ao (Swe)	1.8
IVS thickness (cm)	0.6
LVID diastole (cm)	2.7
PW thickness (cm)	0.6
LVID systole (cm)	1.2
FS (%)	54

Doppler Measurements

PV Vmax (m/s)	0.7
AoV Vmax (m/s)	1.3
MR Vmax (m/s)	5.7
TR Vmax (m/s)	NM
TR PG (mmHg)	NA

IMAGING PERFORMED BY

Eduardo Rodriguez
III, RCS

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease causing moderate mitral and trace tricuspid regurgitation. Moderate left atrial enlargement indicates there is relatively low risk for imminent complication, however risk for progression to spontaneous congestive heart failure in the future is elevated. No additional issues are identified.

HOSPITAL NAME

East Boston Animal
Medical Center

REFERRING VET

Dr. Chopra

Given these findings, continue Pimobendan is recommended as below. Assessment of progression in the future will help predict long term outcome, however prognosis is guarded at this stage (B2).

INVOICE

29088

The cough is suspected to be due to a combination of mainstem bronchi compression and potentially airway disease in this predisposed breed. Screening CXR, hydrocodone, etc. may be useful.

DATE

2/17/23



PATIENT

Olivia Chaparro

SPECIES

Canine

BREED

Maltese

SEX

Female Spayed

AGE

8 years

WEIGHT

13lbs

INTERPRETED BY

Maggie Machen
 Lamy, DVM
 DACVIM (Cardiology)

IMAGING PERFORMED BY

Eduardo Rodriguez
 III, RCS

HOSPITAL NAME

East Boston Animal
 Medical Center

REFERRING VET

Dr. Chopra

INVOICE

29088

DATE

2/17/23

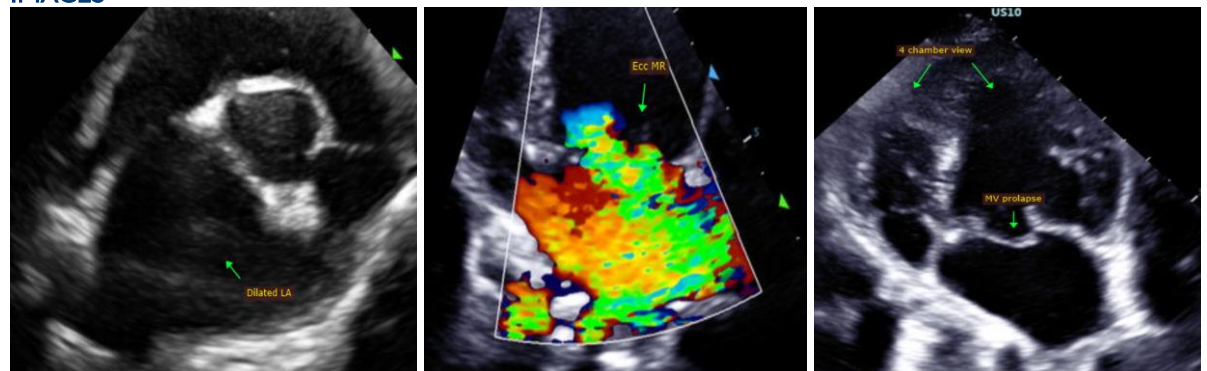
RECOMMENDATIONS

- Continue Pimobendan 0.3mg/kg PO q12h.
- Consider CXR, hydrocodone, etc. as discussed.
- 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 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.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 6 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.

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

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