



PATIENT

Gator Kaufman

SPECIES

Canine

BREED

Terrier Mix

SEX

Female Spayed

AGE

9 years

WEIGHT

23lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Jennifer Migner,
RDCS

HOSPITAL NAME

Wood River Animal
Hospital

REFERRING VET

Dr. Serra

INVOICE

22693

DATE

2/18/22

PRESENTING CLINICAL SIGNS

History: Recheck echo. History chronic valvular disease - Stage B2. Currently, Gator doing well - echo prior to dental prophylaxis. History Cushing's disease. ALP 1500. Medications: Pimobendan 5mg BID. BP: 150mmHg.
-Pertinent previous echo findings (3/2021 MML): Moderate MR, moderate LAE: 2.2cm. LV: 2.8, TR: 2.6.

ECHOCARDIOGRAM FINDINGS

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

Left ventricle: The LV diameter is mildly 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 no 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 indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears normal with 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.

2-Dimensional Measurements

Ao diam (cm)	1.3
LA diam (cm)	2.36
LA:Ao (Swe)	1.8
IVS thickness (cm)	0.7
LVID diastole (cm)	2.9
PW thickness (cm)	0.6
LVID systole (cm)	1.9
FS (%)	35

Doppler Measurements

PV Vmax (m/s)	1.0
AoV Vmax (m/s)	1.6
MR Vmax (m/s)	5.1
TR Vmax (m/s)	2.5
TR PG (mmHg)	26

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease persists without evidence of significant progression. Moderate mitral and mild tricuspid regurgitation are largely unchanged without progressive chamber enlargement. No additional concurrent issues are identified.

Given these findings, continue Pimobendan with no additional medications warranted. Continued assessment of progression in the future will help predict long term outcome, however prognosis is guarded at this stage (B2).

RECOMMENDATIONS

- Continue Pimobendan as prescribed.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.



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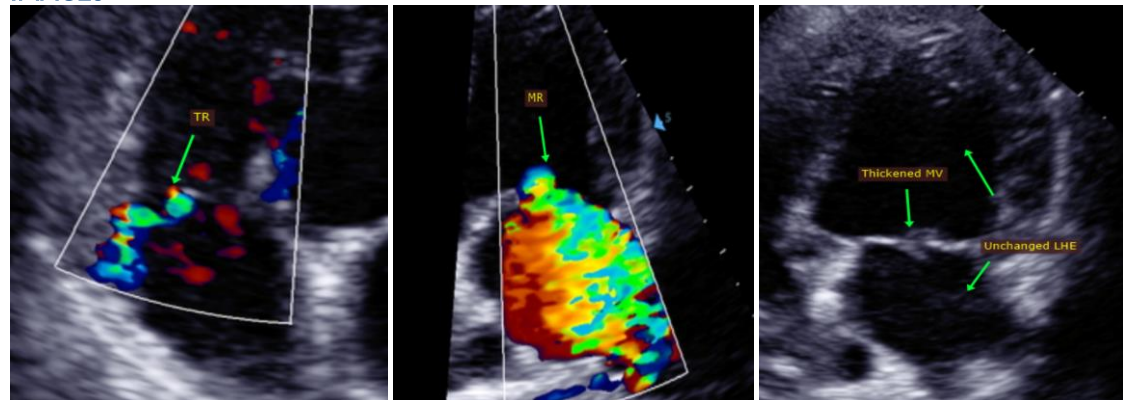
2/18/22

- 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
 Diplomat of the American College of Veterinary Internal Medicine (Cardiology)
 info@sonopath.com