



PATIENT

Kodah Wensley

SPECIES

Canine

BREED

Schnauzer Poodle Mix

SEX

Male Neutered

AGE

18 years

WEIGHT

7.8

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Laurentino, DVM

HOSPITAL NAME

Victoria veterinary
Clinic

REFERRING VET

Dr. Laurentino

INVOICE

46905

DATE

2/19/26

PRESENTING CLINICAL SIGNS

History: First presented in December 2024 because of fainting episodes. Owner declined diagnostics at that time. Heart murmur diagnosed. Presented again in January 2025, and the patient started on Vetmedin with mild improvement, but not really stopped with syncope episodes. After performing radiographs in July 2025, the veterinarian decided to stop medication due to the heart not being enlarged on radiographs. Presented again on Jan 8th, 2026, because the syncope episodes are getting more and more frequent (every day at least one episode). All episodes last for than 1 minute. Patient is still eating and drinking fine and has adequate energy levels for an 18-year-old patient. While waiting for the echo, we have started the patient on Vetmedin 2.5mg 1 cap PO BID on Feb 9th. No improvements on syncope episodes as per the owner.

-Abnormal PE/Chem/CBC/UA Results: MM Pink CRT<2sec. Grade III-III/VI heart murmur. No crackles auscultated or wheezes. Mildly arched back from possible arthritis pain. CBC unremarkable aside neutropenia 2.80. Chemistry WNL's Urinalysis free catch USG 1.031 (collected in the evening), pH 5.

RADIOGRAPHIC FINDINGS *NOTE: Images submitted for supplemental cardiac information only.

Normal cardiac silhouette. No obvious evidence of CHF.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Mild diffuse thickening of mitral valve leaflets with no prolapse into the left atrial lumen. Trace/mild eccentric mitral regurgitation with no left atrial dilation (LA:Ao <1.4). Normal LV diameter with adequate myocardial function. The tricuspid valve appears mildly thickened with no significant tricuspid regurgitation. Normal right atrial and ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No obvious aortic and trace pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

CARDIAC CHART

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	NM	NA	NM	1.1	46	90	NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT	LA (2D short axis Base view) (cm)	LVIDd (Avg; 2D and m-mode short axis) (cm)	LVIDs (Avg; 2D and m-mode short axis) (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	NM	1.5	1.1	7.8	1.7	2.6	1.4
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
BODY WEIGHT DEPENDENT PARAMETERS				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>				10	1.50 (3.8)	3.27 (3.5)	2.06 (3.1)
				15	1.83 (2.0)	3.71 (2.4)	2.43 (2.1)
				20	2.02 (1.9)	4.14 (2.2)	2.80 (2.0)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)

Adapted from June Boon, Veterinary Echocardiography, 1998
Rishniw M and Hollis NE, J Vet Intern Med 2000; 14:429-435



PATIENT

Kodah Wensley

SPECIES

Canine

BREED

Schnazuer Poodle Mix

SEX

Male Neutered

AGE

18 years

WEIGHT

7.8

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Laurentino, DVM

HOSPITAL NAME

Victoria veterinary
Clinic

REFERRING VET

Dr. Laurentino

INVOICE

46905

DATE

2/19/26

Hansson et al, Vet Rad and Ultrasound 2002	40	2.62 (5.2)	5.48 (6.1)	3.96 (5.4)
Bonagura et al. Echocardiography: principles of interpretation, Vet	50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chronic degenerative valve disease causing trace/mild mitral regurgitation. Lack of significant left atrial enlargement indicates the current risk for complication is low. No concurrent issues such as systolic dysfunction or pulmonary hypertension are noted in this study.

These findings would suggest structural disease is not the cause of the reported episodes. Further workup is certainly recommended, as the episodes do sound frequent and significant. A baseline BP and ECG would be reasonable next steps. Assuming full lab work has been assessed, an abdominal ultrasound may also be reasonable.

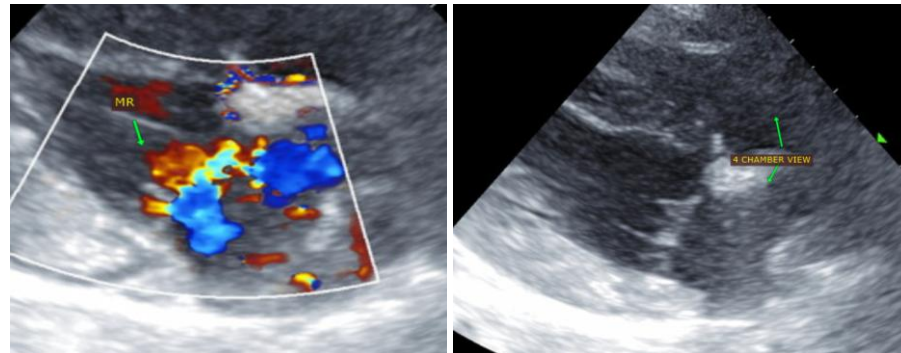
Given these findings, no medications are indicated and Pimobendan can be safely discontinued. Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit. Monitor for development of a progressive cough, labored breathing, exercise intolerance or collapse episodes.

Assessment of progression in the future will help predict long term prognosis, which is highly variable with stage B1 disease. Many B1 dogs will remain asymptomatic with slow progression for years to come.

No cardiac contraindication for general anesthesia prior to chamber enlargement.

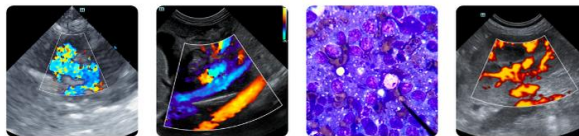
Recommend conservative monitoring with a recheck echocardiogram in 6-12 months to assess rate of progression, sooner if any development of clinical signs in the interim.

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.



PATIENT

Kodah Wensley

SPECIES

Canine

BREED

Schnazuer Poodle Mix

SEX

Male Neutered

AGE

18 years

WEIGHT

7.8

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Laurentino, DVM

HOSPITAL NAME

Victoria veterinary
Clinic

REFERRING VET

Dr. Laurentino

INVOICE

46905

DATE

2/19/26

Maggie Machen Lamy, DVM

Diplomate of the American College of Veterinary Internal Medicine (Cardiology)

info@sonopath.com