

PATIENT

Haus Schilsky

SPECIES

Canine

BREED

Mastiff

SEX

MI

AGE

6 y

WEIGHT

173 lb

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Andrea Nicastro, DVM,
DACVIM

HOSPITAL NAME

VC of Myrtle Beach

REFERRING VET

Dr. Rodger

INVOICE

DATE

2/24/26

PRESENTING CLINICAL SIGNS

Presented for lethargy, marked hyporexia, weight loss. Diagnosed with prostatitis. Responded initially but then declined. Intermittent diarrhea the past few months. Azotemic. FAST scan showed a vegetative lesion on the aortic valve.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

Left atrial size is normal. The mitral valve leaflets are mildly thickened, and a mild jet of eccentric mitral regurgitation is present. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. The aortic valve leaflets are hyperechoic, and there appears to be an ~1.87 cm x 1.30 cm vegetation attached to the right cusp of the valve. There is turbulent systolic flow across the valve, as well as mild to moderate aortic insufficiency. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

ECG during echo: Sinus rhythm

LA - 60.4 mm
LVIDd - 62.0 mm
LVIDs - 30.5 mm
FS - 50.8%
RA - 39.3 mm
LVOT - 1.15 m/s
RVOT - 3.56 m/s

ASSESSMENT/RECOMMENDATIONS

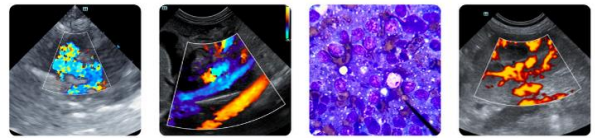
This examination confirms the presence of a vegetative lesion on Haus's aortic valve. While it's possible that the vegetation could be the primary area of infection, it's also possible that Haus could have an infectious process elsewhere in his body that has seeded to his aortic valve. Given the presence of a vegetation, Haus's infection could potentially be the cause of his decreased appetite and lethargy. As Haus does not have dilation of either of his left heart chambers secondary to aortic regurgitation, his current risk for the development of congestive heart failure appears to be fairly low. Similarly, as the stenosis created by the vegetative lesion is mild, Haus's current risk for the development of syncope appears to be fairly low.

Also seen in this exam is mild regurgitation of blood across Haus's mitral valve resulting from degenerative valve disease.

A blood culture is recommended, as is serology for Bartonella.

Broad-spectrum antibiotic therapy (ideally based on the results of culture, though a good place to start is enrofloxacin and amoxicillin) is recommended for at least 8 weeks, possibly longer.

A recheck echocardiogram is recommended in 4 weeks.



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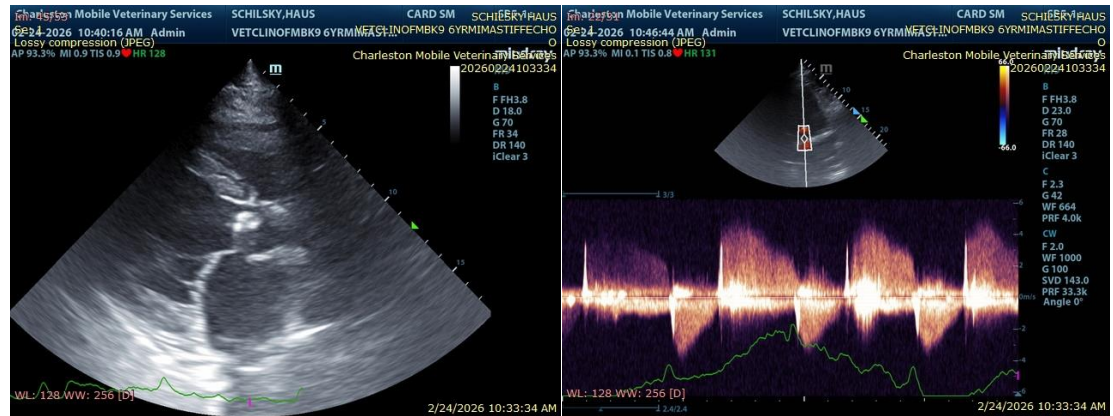
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The prognosis for dogs with endocarditis is guarded, as the aortic valve regurgitation can result in the development of congestive heart failure, while embolization of fragments of the vegetation can cause acute infarction of a variety of organs.



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Keith Blass, DVM, MS, DACVIM (Cardiology) info@SonoPath.com