



**PRESENTING CLINICAL SIGNS**

History: Previously diagnosed with stage B1 degenerative valve disease and mild PH. Presenting now for coughing, shortness of breath, and exercise intolerance. ECG showed a sinus tachycardia.

**DATE**

2/27/23

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**

Kelly Vazquez

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

There is moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. A moderate jet of eccentric mitral regurgitation is present. There is moderate left ventricular dilation. Left ventricular systolic function is mildly hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and a mild to moderate jet of tricuspid regurgitation is present. TR velocity is consistent with the presence of moderate pulmonary hypertension (PG 58.7 mmHg). The pulmonic valve appears normal. No pericardial effusion or cardiac masses are seen.

**PATIENT**

Oliver DeFazio

LA - 39.1 mm  
LVIDd - 40.2 mm  
LVIDs - 22.7 mm  
FS - 43.5%  
RA - 24.9 mm  
LVOT - 1.08 m/s  
RVOT - 1.05 m/s  
TR - 3.83 m/s

**SPECIES**

Canine

**ASSESSMENT/RECOMMENDATIONS**

Degenerative mitral and tricuspid valve disease  
Pulmonary hypertension

**BREED**

Dachshund Mix

This examination demonstrates progression of Oliver's mitral valve disease and pulmonary hypertension since his previous echocardiogram, as he now has moderate dilation of his left heart chambers, as well as moderate pulmonary hypertension. Oliver's mitral valve disease and pulmonary hypertension are both advanced enough to be able to result in exercise intolerance, therefore, one or both are likely contributing to his. Oliver's mitral valve disease is also advanced enough to be able to result in coughing and shortness of breath, therefore, left-sided congestive heart failure should be considered as a possible cause of these symptoms, though thoracic radiographs are recommended for further evaluation.

**SEX**

MN

**AGE**

8 y

I recommend starting Oliver on pimobendan (2.5 mg BID) and sildenafil (10 mg BID), as the former should help to slow the progression of his valvular diseases, the latter should treat his pulmonary hypertension, and both should reduce his risk for exercise intolerance and syncope. Should radiographs show the presence of cardiogenic pulmonary edema, additional therapy with furosemide (20 mg BID) and enalapril (5 mg BID) would be warranted.

**WEIGHT**

22 lb

Recheck radiographs and a renal/electrolyte profile are recommended in 1 week if furosemide and enalapril are started. A recheck echocardiogram is recommended in 6 months.

**HOSPITAL NAME**

Sova AH

**REFERRING VET**

Dr. Sova



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PATIENT  
Oliver DeFazio

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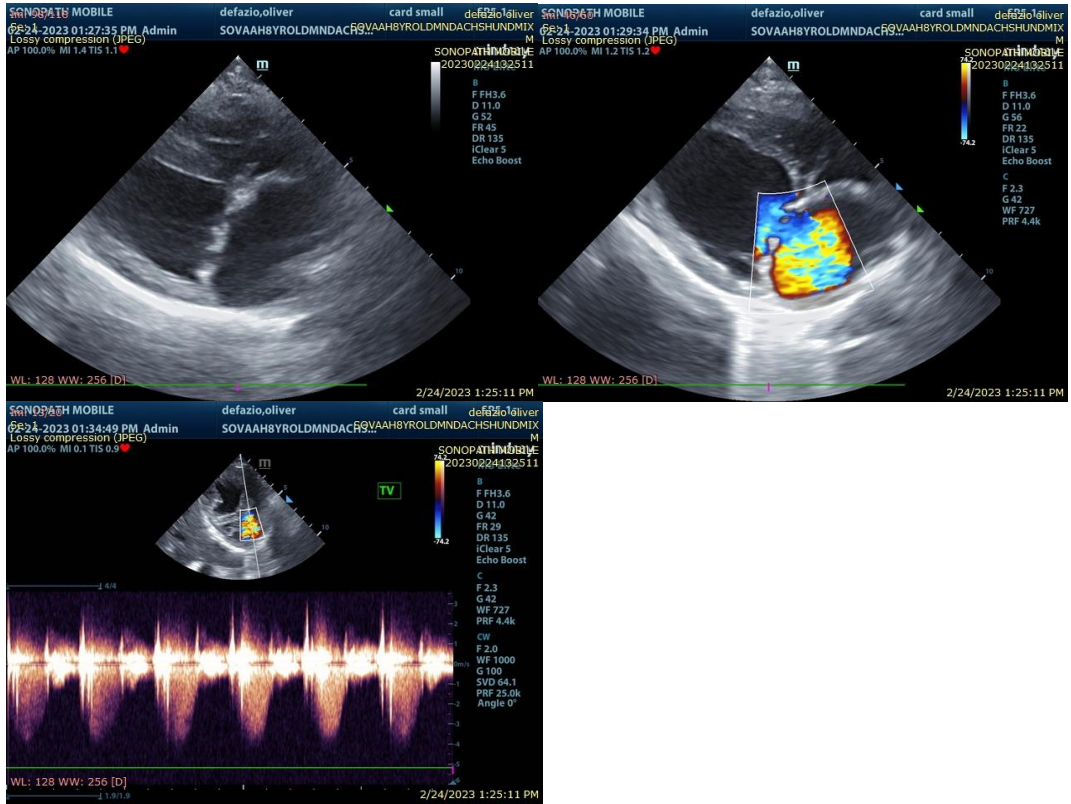
SEX  
MN  
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AGE  
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WEIGHT  
22 lb

HOSPITAL NAME  
Sova AH

REFERRING VET  
Dr. Sova



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