



PRESENTING CLINICAL SIGNS

History: New grade 2/6 left-sided murmur. Pre-anesthetic evaluation. CXR WNL.

DATE

2/28/23

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Amy Mayhew, LVT

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve appears normal. Left ventricular wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. The left ventricular outflow tract, aorta, and aortic valve appear normal, though there is mildly increased flow velocity in this region. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal. The pulmonary artery and pulmonic valve appear normal, though trivial pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Bailey Pierce

LA - 39.9 mm
IVSd - 9.4 mm
LVPWd - 9.9 mm
LVIDd - 41.9 mm
LVIDs - 29.5 mm
FS - 29.6%
RA - 34.3 mm
LVOT - 2.34 m/s
RVOT - 1.50 m/s

SPECIES

Canine

BREED

Golden Retriever

ASSESSMENT/RECOMMENDATIONS

Bailey's murmur appears to be due to the presence of mildly increased flow velocity in her left ventricular outflow tract/aorta. While I can't definitively rule out the presence of very mild, clinically insignificant subaortic stenosis, the fact that no lesions were visualized by 2D imaging, and that Bailey is already a year old and the velocity is less than 2.5 m/s, suggests that the increased flow velocity is functional/innocent in nature.

SEX

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No therapy is recommended based on this exam, and there is no contraindication to general anesthesia or the use of any specific anesthetic agents.

A recheck echocardiogram is recommended if the characteristics of Bailey's murmur change, or if other new physical exam and/or clinical abnormalities suggestive of cardiac dysfunction develop.

AGE

1 y

WEIGHT

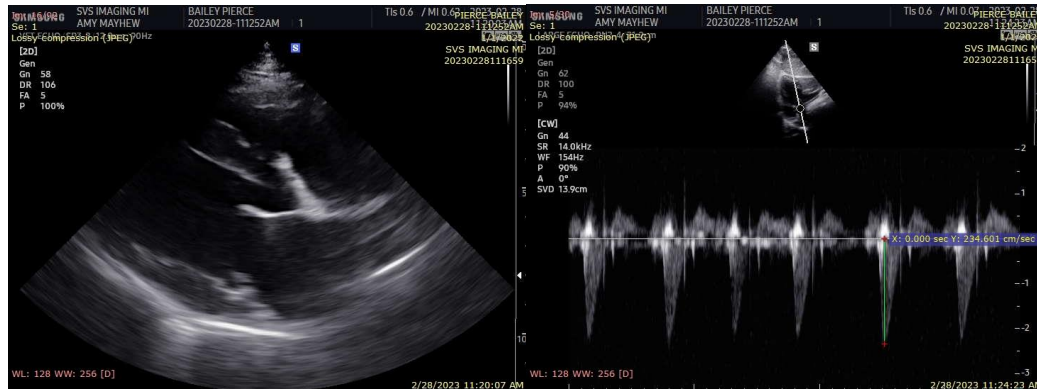
69 lb

HOSPITAL NAME

SVS Imaging MI

REFERRING VET

Dr. Foster



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.

DATE

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.

2/28/23

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