



PATIENT

Tito McLeod

SPECIES

Canine

BREED

Terrier

SEX

MN

AGE

14 y

WEIGHT

4 kg

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Dave Stasiuk, RDMS,
RDCS

HOSPITAL NAME

Creekside VH

REFERRING VET

Dr. Singh

INVOICE

DATE

2/5/26

PRESENTING CLINICAL SIGNS

Grade 5/6 murmur. Cough. Radiographs showed cardiomegaly and pulmonary edema. Receiving furosemide and pimobendan.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

There is moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. A moderate to severe jet of eccentric mitral regurgitation is present. There is moderate to severe left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal, though trace aortic insufficiency is present. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity measures at the upper limit of normal. 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 - 29.7 mm

LVIDd - 31.6 mm

LVIDs - 12.1 mm

FS - 61.7%

RA - 14.7 mm

LVOT - 1.68 m/s

RVOT - 0.99 m/s

TR - 2.80 m/s

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

This examination demonstrates regurgitation of blood across Tito's mitral and tricuspid valves resulting from degenerative valve disease. Tito's tricuspid valve disease is mild, and appears to be well-compensated at this time. His mitral valve disease is more advanced, as Tito has moderate to severe mitral regurgitation present, with moderate secondary dilation of his left atrium and moderate to severe dilation of his left ventricle, though his left ventricular systolic function is well-preserved. Given these findings, it comes as no surprise that Tito reportedly is experiencing an episode of left-sided congestive heart failure (CHF). In addition to CHF, Tito is at moderately increased risk for the development of exercise intolerance, syncope, and/or arrhythmia formation, therefore, careful monitoring for these is recommended.

Continued use of pimobendan (1.25 mg BID) and furosemide is warranted based on this exam, though if Tito has been receiving furosemide prior to this current episode of CHF, an increase by 1-2 mg/kg/day would be warranted. I also recommend starting Tito on enalapril (2.5 mg am, 1.25 mg pm) and spironolactone (6.25 mg BID).

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



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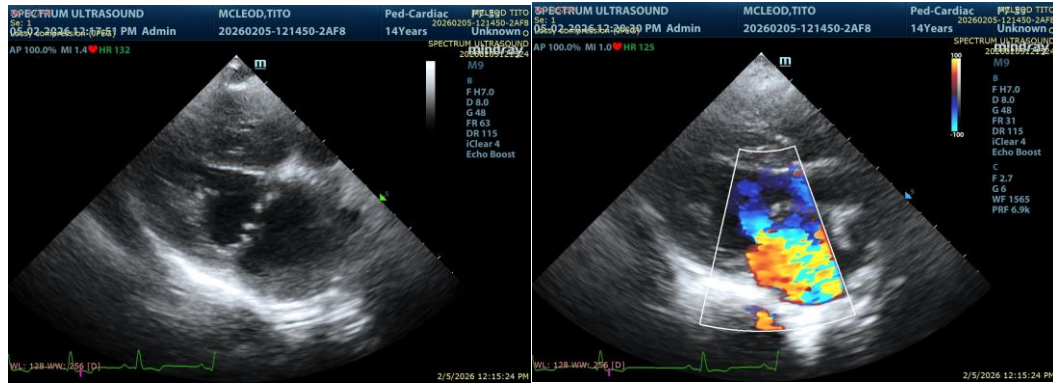
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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