



PATIENT

Ziva Caito

SPECIES

Canine

BREED

Terrier Mix

SEX

FS

AGE

10 y

WEIGHT

10.7 lb

PRESENTING CLINICAL SIGNS

Grade 5/6 murmur. Has had episodes of disorientation, but no obvious syncope. Increased RR at rest. Previously diagnosed with stage B1 valvular disease in January 2025.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

There is severe left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. There is Doppler evidence of mitral regurgitation present. There is severe left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and there is Doppler evidence of tricuspid regurgitation present. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

LA/Ao – 2.75
 LVIDd – 38.5 mm
 LVIDs – 18.3 mm
 FS – 52.5%
 RA – 14.2 mm
 LVOT – 1.32 m/s
 RVOT – 0.69 m/s

INTERPRETED BY

Keith Blass, DVM, MS,
 DACVIM (Cardiology)

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

IMAGING PERFORMED BY

Brandi Kurzowski

This examination demonstrates significant progression of Ziva's mitral valve disease over the past 14 months, as she now has severe dilation of both her left atrium and left ventricle. Given this, it's possible that Ziva's episodes of disorientation could be pre-syncope in nature, and I'm concerned that her increased respiratory rate could be due to the development of left-sided congestive heart failure.

HOSPITAL NAME

Corfu VC

Ziva's tricuspid valve disease is mild and well-compensated.

Thoracic radiographs are recommended to further evaluate Ziva's increased respiratory rate.

REFERRING VET

Dr. Weaver

I recommend starting Ziva on pimobendan (1.25 mg BID), as this medication should help to slow the progression of her valvular diseases, as well as decrease her risk for syncope/pre-syncope secondary to her mitral valve disease. If radiographs demonstrate the presence of pulmonary edema, additional therapy with furosemide (10 mg BID) and enalapril (2.5 mg BID) would be warranted.

INVOICE

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.

DATE

3/10/26



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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) info@SonoPath.com