



DATE PRESENTING CLINICAL SIGNS

3.12.26

PATIENT

Manor Braun

SPECIES

Canine

BREED

Chihuahua

SEX

MN

AGE

1.7.10

WEIGHT

10.2lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

HOSPITAL NAME

Doc Side Veterinary
Medical Center

REFERRING VET

Dr. Vaughan

INVOICE

47229

History: Recheck echo. Grade III-IV/VI murmur PMI over mitral valve, NSR.
-Pertinent abnormal PE/Chem/CBC/UA Results: CBC - Platelet count: 413,000/uL (Normal 170,000-400,000/uL). Mild increase. NSF. - Everything else on the CBC: WNL.
Chemistry Panel - ALP: 449 U/L (Normal 5-131 U/L). - Was 211 in December 2025, 481 in October 2024, and 492 in November 2024. - Highest value in February 2024 at 879 U/L. - ALT: 93 U/L (WNL). - Was 38 in February 2024 and 60 in November 2025. - Highest value was 593 U/L. - Total bilirubin: 0.1 mg/dL (Normal 0.1-0.3 mg/dL). - Triglycerides: 451 mg/dL (Normal <291 mg/dL). - Was 65, 82, and 103 in January 2024.
- All else on the chemistry within normal limits. - Creatinine: 0.9 mg/dL. - BUN: 28 mg/dL. - SDMA: 10.7 ug/dL. - Phosphorus: 4.5 mg/dL. - T4: 1.5 ug/dL (Normal). Urinalysis - pH: 5.5 - Specific gravity: 1.019 (isosthenuric) - Quiet sediment.
-Current medications: Hydrocodone bitartrate/Homatropine methyl bromide 5 mg/1.5mg 1/2-tab q 8-12h, Gabapentin 50mg q8-12h, Cerenia 16 1/2-tab SID every other day, RX renal diet
-Blood Pressure: 158, 156 and 156mmHg
-Sedation used: Not required to complete full diagnostic ultrasound.
-Pertinent previous ultrasound results (2/2025 MML): CVD B1. Mild MR, mild LAE, mild TR, mild PH: 3.2m/s. LA: 1.6, LV: 2.5.
-STAT: Not requested.
-Imaging performed by: Stephanie Warga RDCS, RVT.

RADIOGRAPHIC FINDINGS *NOTE: Images submitted for supplemental information only.
Mild cardiomegaly. No obvious evidence of CHF.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Mild diffuse thickening of mitral valve leaflets with mild prolapse into the left atrial lumen. Mild eccentric mitral regurgitation with mild left atrial dilation. Normal MR velocity. Normal LV diameter with adequate myocardial function. The tricuspid valve appears normal with mild tricuspid regurgitation. Velocity consistent with mild to moderate pulmonary hypertension. Normal right atrial and ventricular diameter and morphology. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic outflow velocities with laminar flow. No obvious aortic or pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

CARDIAC CHART

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	6.0	3.5	NM	1.4	45	78	NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)

NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	NM	NM	0.6	4.6	1.7	2.1	1.2
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
BODY WEIGHT DEPENDENT PARAMETERS				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>				10	1.50 (3.8)	3.27 (3.5)	2.06 (3.1)
				15	1.83 (2.0)	3.71 (2.4)	2.43 (2.1)
				20	2.02 (1.9)	4.14 (2.2)	2.80 (2.0)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)
				40	2.62 (5.2)	5.48 (6.1)	3.96 (5.4)
				50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)

Adapted from June Boon, Veterinary Echocardiography, 1998
Rishniw M and Hollis NE, J Vet Intern Med 2000; 14:429-435
Hansson et al, Vet Rad and Ultrasound 2002
Bonagura et al. Echocardiography: principles of interpretation, Vet Clin North Am 15:1177, 1995

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

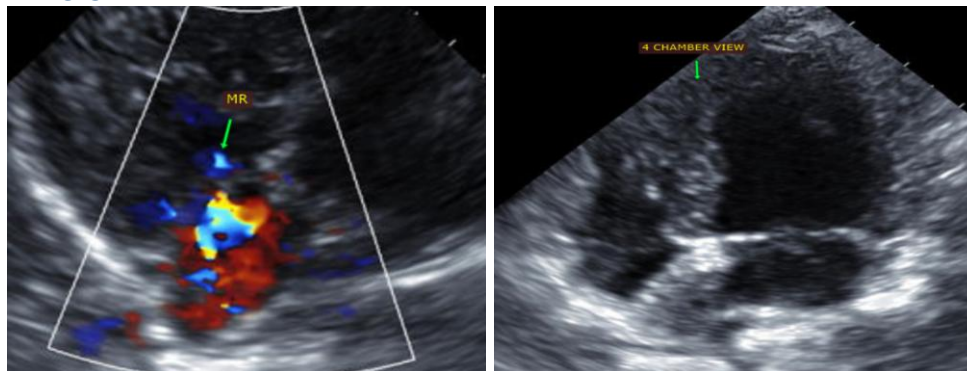
Compared to the prior evaluation, pulmonary pressures have increased slightly. The right heart is not enlarged, and this remains subclinical. The left-sided disease is stable with mild MR and only slight LA enlargement. No additional issues have developed.

Given these findings, no cardiac medications are clearly indicated. Continued assessment of progression in the future will help predict long term prognosis, which is highly variable at this stage (B1). Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit. Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

Anesthetic risk is considered mild if needed.

Recommend conservative monitoring with a recheck echocardiogram in 6-12 months, sooner if any development of clinical signs.

IMAGES



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. This report was generated using transcription software, and minor dictation

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

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