



PATIENT
Hudson Pennington

SPECIES
Canine

BREED
Retriever Mix

SEX
Male Neutered

AGE
4 years

WEIGHT
59.9lbs

INTERPRETED BY
Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY
Pamela Harrigan,
RDCS

HOSPITAL NAME
Mass Veterinary
Services

REFERRING VET
Dr. Masloski

INVOICE
23143

DATE
3/16/22

PRESENTING CLINICAL SIGNS

History: Recheck echo. History of two collapse episodes preceded by exercise/coughing in July 2020. Seen at ER - Echo reportedly revealed early DCM-like changes (thin LV walls, subjectively: IVS 0.77 cm; PW 0.76 cm; LVID 4.26 cm), and low normal systolic function (FS 27.8%); right heart subjectively dilated; normal LA size; ECG = NSR). The collapse episodes were suspected to have been vasovagal in origin (initiated by coughing). Taurine levels were normal; taurine supplementation was started. Subsequent echo in December 2020 - NSR on ECG, all chamber sizes were normal; mildly thinned LV walls (IVS 0.74 cm; PW 0.69 cm; LVID 4.15 cm;) - Ddx include normal patient variation vs very early DCM. The LVID was slightly smaller, and the systolic function had slightly increased (FS 31.7%) - query normal interday variation vs the taurine supplementation. Currently, Hudson is doing well - no coughing, good appetite and energy level. On auscultation: NSR, no murmurs noted, PSS, lung fields clear. BP: 120 mmHg x 5. Medications: Taurine 500mg 2 capsules twice a day. *No sedation for study.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is normal with low normal myocardial function. LV wall thicknesses are normal.

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is mildly thickened with trivial MR.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity. No aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears normal with no tricuspid regurgitation.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No obvious cardiac shunts. No pericardial or pleural effusion noted. No obvious cardiac masses.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 120bpm.

2-Dimensional Measurements

Ao diam (cm)	2.1
LA diam (cm)	2.4
LA:Ao (Swe)	1.1
IVS thickness (cm)	0.8
LVID diastole (cm)	4.1
PW thickness (cm)	0.8
LVID systole (cm)	2.8
FS (%)	32

Doppler Measurements

PV Vmax (m/s)	0.9
AoV Vmax (m/s)	1.3
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

INTERPRETATION OF THE FINDINGS

Overtly normal cardiac dimensions and function. The fractional shortening is normal for this signalment with no significant chamber dilation. No significant valve leaks are noted, and no pathology is suspected.



PATIENT
Hudson Pennington

Given these findings, the prior echo is unlikely to have reflected DCM as progression would be expected given the timeframe. There is no harm in continuing Taurine on the off chance this is/was beneficial. Avoid non-traditional diets in this patient lifelong.

SPECIES
Canine

Prognosis is open.

BREED
Retriever Mix

RECOMMENDATIONS

- No cardiac medications are indicated.
- Reasonable to continue Taurine 1000mg PO q12h.
- No cardiac contraindication for general anesthesia.
- Monitor for development of a murmur, cough, labored breathing, exercise intolerance or collapse episodes.

SEX
Male Neutered

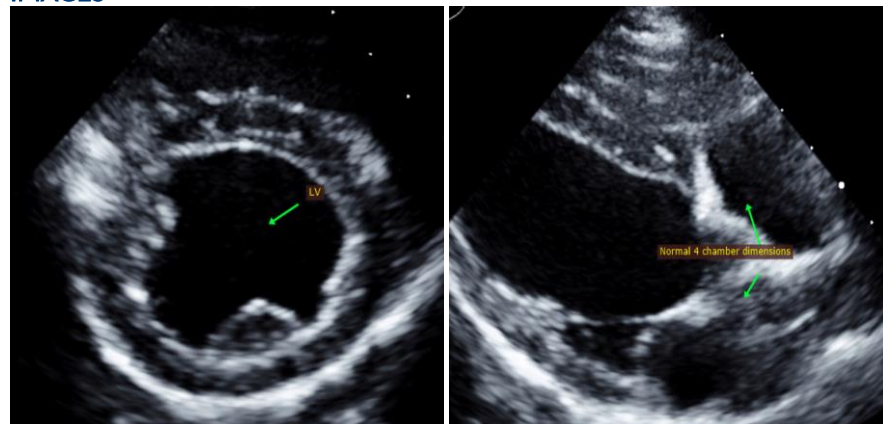
PLAN

- Recommend a recheck echocardiogram annually, sooner if any clinical signs arise.

AGE
4 years

IMAGES

WEIGHT
59.9lbs



INTERPRETED BY
Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

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.

IMAGING PERFORMED BY
Pamela Harrigan,
RDCS

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.

HOSPITAL NAME
Mass Veterinary
Services

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

REFERRING VET
Dr. Masloski

Echocardiogram performed by:

Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)

INVOICE
23143

DATE
3/16/22