



**PATIENT**

Bowie Miller

**SPECIES**

Canine

**BREED**

Australian Shepherd

**SEX**

Female Intact

**AGE**

1.8 years

**WEIGHT**

49.7lbs

**INTERPRETED BY**

Maggie Machen  
Lamy, DVM  
DACVIM (Cardiology)

**IMAGING PERFORMED BY**

Pamela Harrigan,  
RDCS

**HOSPITAL NAME**

Mass Veterinary Services

**REFERRING VET**

Dr. Masloski

**INVOICE**

29771

**DATE**

3/22/23

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. History of normal cardiac structure and function on prior echo 9/13/22 (MML). Presently, Bowie is scheduled to be spayed in May. She has been worked up for heavy panting/respiratory disease and has been essentially normal. She has a good appetite and remains active. On exam: NSR, no murmurs noted, PSS, lung fields clear, mm pink, moist, CRT<2. BP: 120-130mmHg. \*No sedation for study.

-Pertinent previous echo measurements: LA 2.4 cm; LA:Ao 1.1; LV 4.2 cm.

**ECHOCARDIOGRAM FINDINGS**

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

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

**Left atrium:** The left atrium is normal.

**Mitral valve:** The mitral valve is normal with no prolapse into the left atrial lumen. No regurgitation.

**Aortic valve/aorta:** The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. 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 pericardial or pleural effusion noted. No obvious cardiac masses.

**Heart rhythm:** ECG reveals a sinus rhythm with an average HR of 130bpm.

**2-Dimensional Measurements**

Ao diam (cm)	2.2
LA diam (cm)	2.9
LA:Ao (Swe)	1.3
IVS thickness (cm)	1.0
LVID diastole (cm)	3.8
PW thickness (cm)	1.0
LVID systole (cm)	2.3
FS (%)	39

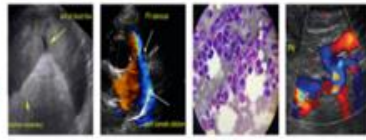
**Doppler Measurements**

PV Vmax (m/s)	1.1
AoV Vmax (m/s)	1.8
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

**INTERPRETATION OF THE FINDINGS**

Persistently normal cardiac dimensions and function with no obvious pathology appreciated. The LV was borderline dilated in the prior exam, which appears normal in this study. This likely reflects normal daily variation. No significant valvular leaks are visualized, and no evidence of pulmonary hypertension.

Prognosis is open.



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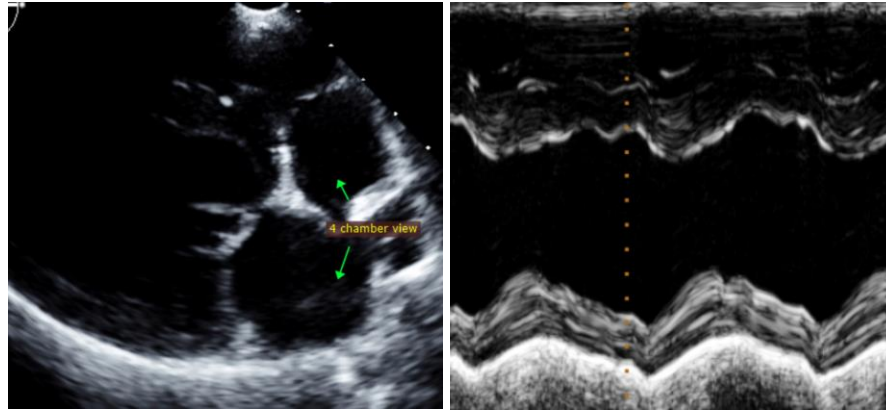
**RECOMMENDATIONS**

- No cardiac medications are clearly indicated.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- Anesthetic risk is considered mild if needed. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.
- Monitor for development of a murmur, cough, labored breathing, exercise intolerance or collapse episodes.

**PLAN**

- A recheck echocardiogram is only necessary if a murmur is noted or additional clinical issues arise.

**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.

Maggie Machen Lamy, DVM  
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Echocardiogram performed by: Pamela Harrigan, RDCS  
Pet Animal Ultrasound Service (4paus.com)