



PATIENT

Henry Corley

SPECIES

Canine

BREED

Chihuahua

SEX

Male Neutered

AGE

11.8 years

WEIGHT

10lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Kelly Romero

HOSPITAL NAME

Midtown Veterinary
Medical Center

REFERRING VET

Dr. McCarthy

INVOICE

29835

DATE

3/24/23

PRESENTING CLINICAL SIGNS

History: Henry was having a pre-anesthetic ECG when an ectopic ventricular beat was noted (HR was 143). The ECG was interpreted by an Iddex cardiologist who also indicated there was a left axis deviation. His rule outs for the isolated ventricular arrhythmia included both cardiac and non-cardiac causes, so they are starting with this echo. The patient was very nervous during the ECG. He is asymptomatic for cardiac disease. No murmur or arrhythmia auscultated. Systolic blood pressure today was 153. No reported blood work abnormalities.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Mitral valve is mildly thickened with no prolapse into the left atrial lumen. Trace central mitral regurgitation with normal left atrial dimension. Normal LV diameter with adequate myocardial function. The tricuspid valve appears normal with no tricuspid regurgitation. Normal right atrial and ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No obvious aortic and trival 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	NA	NA	1.1	1.2	30	60	0.2
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	0.6	0.8	3.5	1.2	1.8	1.3
*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)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overtly normal cardiac dimensions and function, with no obvious dysfunction or dilation of the left heart. No evidence of pulmonary hypertension. No obvious cardiac tumors: however, it is important to note that small masses are easily missed particularly in the absence of effusion. Trace mitral regurgitation is noted with early valve thickening, which likely reflects early valve disease. Follow up is recommended should a murmur be ausculted in the future.



PATIENT

Henry Corley

No cardiac cause for VPCs is identified. Consider systemic or primary arrhythmic causes. Stress/anxiety may also be contributing, which is a diagnosis of exclusion. Follow up as dictated by the ECG evaluation.

SPECIES

Canine

No structural contraindication for general anesthesia; however, this does not address the arrhythmia. Anesthetic guidelines should be dictated by the amount and complexity of the arrhythmia.

BREED

Chihuahua

Monitor for development of a heart murmur, cough, labored breathing, exercise intolerance or collapse episodes.

SEX

Male Neutered

A recheck echocardiogram is recommended if a murmur develops, or signs of cardiac compromise develops.

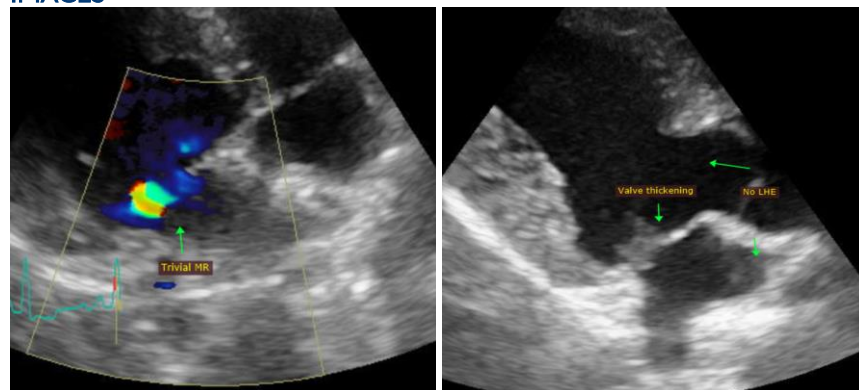
AGE

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IMAGES



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(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

Kelly Romero

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

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Medical Center

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