



PATIENT

Remington Moro

SPECIES

Canine

BREED

English Bulldog

SEX

Female Intact

AGE

1 year

WEIGHT

49lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Guhrun Gunther, DVM

HOSPITAL NAME

New Frontier Animal
Medical Center

REFERRING VET

Dr. Gunther

INVOICE

47314

DATE

3/25/26

PRESENTING CLINICAL SIGNS

History: Recheck echo. Doing well. BP: 142, 131, 107, 125, 120mmHg.

-Current medications: Atenolol 10mg PO BID, Benazepril 2.5mg PO BID, Furosemide 60mg PO BID

-Pertinent previous echo findings (8/2025 MML): SAS/AS severe, MV dysplasia. Moderate MR, moderate LAE. No change from previous. AV max: 5.0, LA: 3.2, LV: 3.8.

ELECTROCARDIOGRAPHIC FINDINGS *Note: Single lead ECGs are evaluated as a rhythm strip.

Morphology/MEA cannot be definitively commented on.

A single lead ECG is available; 25mm/s, 10mm/mV. The average heart rate is 150bpm. The rhythm is sinus in origin, with a p for every QRS complex and vice versa. The P and QRS morphologies are positive. No ectopic beats, pauses or other dysrhythmias observed.

ECG diagnosis: Normal sinus rhythm.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is moderately hypertrophied (1.3cm globally). There is a significantly hyperechoic endocardium consistent with marked fibrosis. Moderate papillary muscle hypertrophy and fibrosis. The left atrium is moderately enlarged. The right atrium is normal in size. The right ventricle appears normal. The RVOT appears normal. The mitral valve is mildly dysplastic with no obvious stenosis seen. There is trace mitral regurgitation. Trace tricuspid regurgitation seen. Normal velocity. Blood flow through the LVOT is severely elevated. The LVOT is severely elevated with a fixed profile. The aortic valve is abnormal and appears stenotic. Trace aortic insufficiency. No obvious shunts. No evidence of cardiac tumors or metastatic lesions on this scan. No pleural or pericardial effusion seen.

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	NM	3.0	>2.0	1.8	42	75	0.3	
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	5.5	0.9	22.2	3.2	3.5	2.0	
*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)

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



PATIENT

Bonagura et al. Echocardiography: principles of interpretation, Vet	50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)
---	----	------------	------------	------------

Remington Moro

SPECIES

Canine

BREED

English Bulldog

SEX

Female Intact

AGE

1 year

WEIGHT

49lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Gudrun Gunther, DVM

HOSPITAL NAME

New Frontier Animal
Medical Center

REFERRING VET

Dr. Gunther

INVOICE

47314

DATE

3/25/26

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Persistently stable findings. The LV hypertrophy is slightly increased; however, the remainder of the study is unchanged. The outflow tract obstruction remains severe, although the HR well controlled. No additional issues have developed. The ECG is normal with a normal sinus rhythm.

Given these findings, continue 3 medications as prescribed. No additional medications are clearly indicated.

Monitor for development of labored breathing, exercise intolerance or collapse episodes, as SAS/AS patients are more predisposed to development of arrhythmias than to CHF. Mild exercise restriction is advised lifelong.

Prognosis in this case is poor, given the severe changes. If quality of life suffers and referral is declined, euthanasia should be considered. This patient is at extremely high risk for sudden death, due to the appearance of the left ventricle and this will persist lifelong.

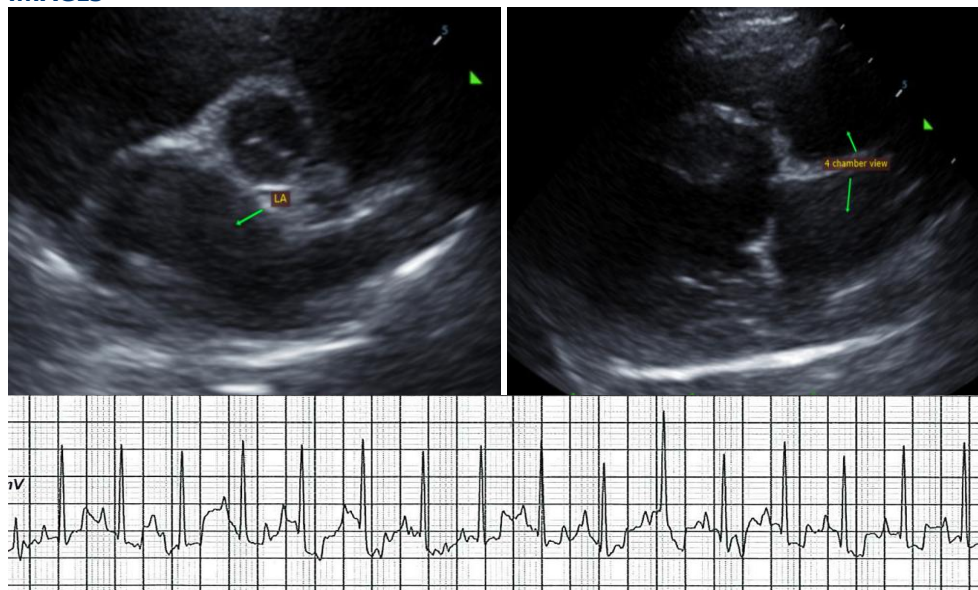
Anesthesia is not advised in this case.

PLAN

Continue three medications as previously prescribed.

Monitor renal values and BP every 3-4 months lifelong.

IMAGES





PATIENT

Remington Moro

SPECIES

Canine

BREED

English Bulldog

SEX

Female Intact

AGE

1 year

WEIGHT

49lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Gudrun Gunther, DVM

HOSPITAL NAME

New Frontier Animal
Medical Center

REFERRING VET

Dr. Gunther

INVOICE

47314

DATE

3/25/26

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

Diplomate of the American College of Veterinary Internal Medicine (Cardiology)

info@sonopath.com