



PRESENTING CLINICAL SIGNS

History: Murmur. Elevated BNP.

DATE

3/27/23

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Tom McNeill

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

There is mild to moderate left atrial dilation. The mitral valve leaflets are mildly thickened and exhibit mild systolic prolapse. There is Doppler evidence of mitral regurgitation present. There is mild left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.

LA - 38.2 mm
LVIDd - 35.7 mm
LVIDs - 18.5 mm
FS - 48%
RA - 21.7 mm
LVOT - 1.33 m/s
RVOT - 1.02 m/s

PATIENT

Max Craig

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

SPECIES

Canine

BREED

Cocker Spaniel

This examination demonstrates regurgitation of blood across Max's mitral valve resulting from degenerative valve disease. Secondary to his regurgitation, Max has mild to moderate dilation of his left atrium and mild dilation of his left ventricle, though his left ventricular systolic function is well-preserved. Max's mitral valve disease is still compensated, however, he could become at risk for the development of clinical signs secondary to it, such as coughing, exercise intolerance, syncope, and labored breathing, if his disease progresses much further, and careful monitoring for these signs is recommended.

SEX

MN

I recommend starting Max on pimobendan (5 mg am, 2.5 mg pm), as this medication should help to slow the progression of his mitral valve disease.

A recheck echocardiogram is recommended in 9 months. Thoracic radiographs are recommended if Max experiences respiratory clinical signs.

AGE

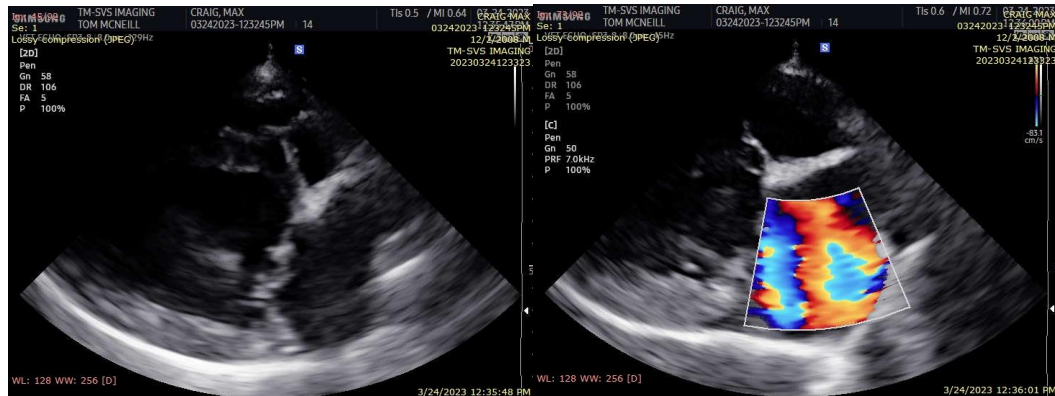
14 y

WEIGHT

31.6 lb

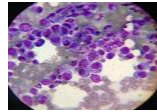
HOSPITAL NAME

SVS Imaging CT



REFERRING VET

Dr. Kalirawana



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.

DATE

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Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

PERFORMED BY:

Tom McNeill

Keith Blass, DVM, MS, DACVIM (Cardiology)
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631-804-5754

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