



PATIENT

Gracie Laden

PRESENTING CLINICAL SIGNS

History: Failed cardiac testing for breeding, murmur heard, echo recommended. (Phil Fox DVM DACVIM).

SPECIES

Canine

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The mitral valve leaflets appear normal in form and function with no thickening or prolapse into the left atrial lumen. Trivial mitral regurgitation noted with normal left atrial dimension. Normal LV diameter with adequate myocardial function. Normal LV wall thickness. The tricuspid valve appears subjectively normal, no tricuspid regurgitation. Normal right atrial and ventricular diameter and morphology. The pulmonic valve is normal in morphology and mobility. The aortic valve is normal with no aortic insufficiency. Mild subaortic narrowing in systole (see below). Normal pulmonic and mildly elevated aortic outflow velocity. No pulmonic and trivial aortic insufficiency. No pericardial or pleural effusion noted. No cardiac tumors identified.

BREED

Golden Retriever

SEX

Female Intact

AGE

2 years

CARDIAC CHART

WEIGHT

61.51lbs

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

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	1.0	1.2	31	60	0.18
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	95	2.5	1.2	27.9	2.4	4.2	2.9
*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)

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
 Bonagura et al. Echocardiography: principles of interpretation, Vet Clin North Am 15:1177, 1995

IMAGING PERFORMED BY

Kelly Vazquez, CVT

HOSPITAL NAME

New Bridge Veterinary Practice

REFERRING VET

Dr. Glennon

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cause of the murmur is mildly elevated blood flow velocity through the LVOT and aortic root, consistent with mild sub-aortic stenosis (SAS). The LV wall dimensions are normal however, indicative of no significant pressure overload. No additional issues are identified.

INVOICE

23313

No cardiac medications are indicated, as most patients with mild SAS will live a normal life free of complications. That being said, breeding is contraindicated in this patient and castration is recommended.

DATE

3/28/22



PATIENT

Gracie Laden

From a cardiac standpoint, monitor for development of labored breathing, exercise intolerance or collapse episodes, as SAS patients are more predisposed to development of arrhythmias than to CHF (particularly in this breed).

SPECIES

Canine

Anesthetic risk is low. Avoid heart rate stimulating drugs such as atropine or glycopyrrolate unless clinically indicated. Recommend prophylactic antibiotics for any orthopedic or dental procedure in the future given slight predisposition to endocarditis. Monitor ECG both intra and post-operatively closely, given the breed predisposition to ventricular ectopy.

BREED

Golden Retriever

A recheck echocardiogram is recommended in 1 year to screen for progression, sooner if any clinical signs arise.

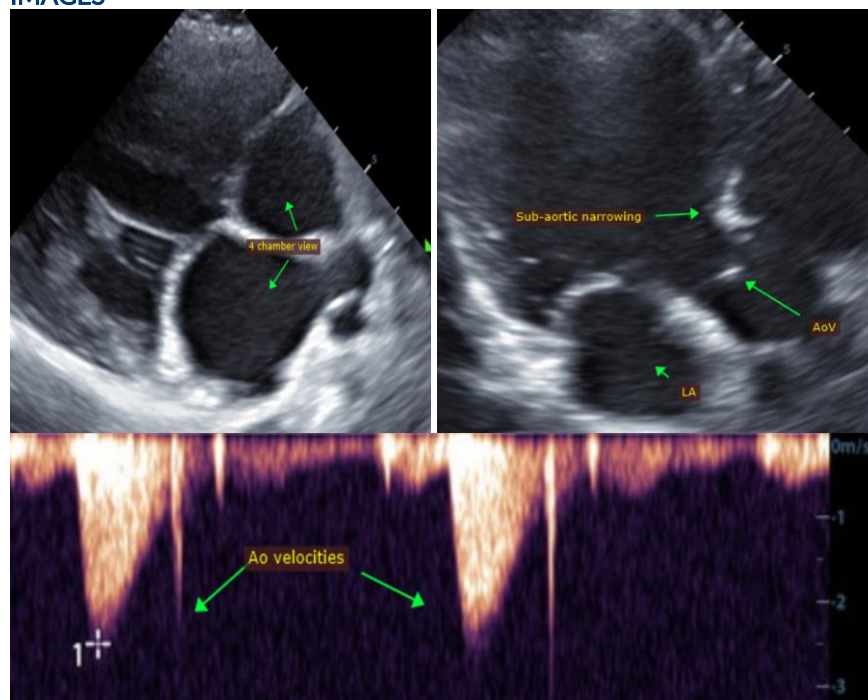
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IMAGES

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Veterinary Practice

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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.

INVOICE

23313

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DATE

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