



PATIENT

Ruby LoSasso

SPECIES

Canine

BREED

Golden Retriever

SEX

Female Spayed

AGE

8 years

WEIGHT

64.9lbs

PRESENTING CLINICAL SIGNS

History: Ruby was noted to have a heart murmur in October 2018. She has a history of atopy. Good appetite and no exercise intolerance - walks ~ 2 miles every day. On auscultation: NSR, grade IV/VI murmur with PMI left apical area radiating to right, PSS, lung fields clear. BP: 160mmHg x 5. On no medications. *No sedation for study.

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 minimally increased.

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is mildly thickened with no prolapse into the left atrial lumen. Trivial central mitral regurgitation.

Aortic valve/Aorta: The aortic valve appears trileaflet with normal mobility. Mildly elevated aortic outflow velocity. Mild dilation of the ascending segment. A sub-aortic ridge can be seen. 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 appears thickened with mildly elevated pulmonic outflow velocities. No significant pulmonic insufficiency.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 100bpm.

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

2-Dimensional Measurements

Ao diam (cm)	2.4
LA diam (cm)	2.7
LA:Ao (Swe)	1.1
IVS thickness (cm)	1.0
LVID diastole (cm)	3.7
PW thickness (cm)	1.0
LVID systole (cm)	2.5
FS (%)	32

Doppler Measurements

PV Vmax (m/s)	2.2
AoV Vmax (m/s)	2.3
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

IMAGING

PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Masloski

INTERPRETATION OF THE FINDINGS

The cause of the murmur is two-fold with mild subaortic stenosis (SAS), in addition to mild pulmonic stenosis. This is highly unusual to see concurrently, although neither issue appears hemodynamically significant. The overall cardiac dimensions and function appear normal, and this is likely of little clinical consequence in an 8-year-old dog. No additional issues are identified in this study.

Given these findings, the prognosis is good, as most dogs able to live a normal lifespan free of complication. Serial echocardiography is recommended, mostly to screen for development of disease the preexisting murmur may mask.

INVOICE

23340

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RECOMMENDATIONS

- In an asymptomatic dog with only mild stenosis, no cardiac medications are clearly indicated.



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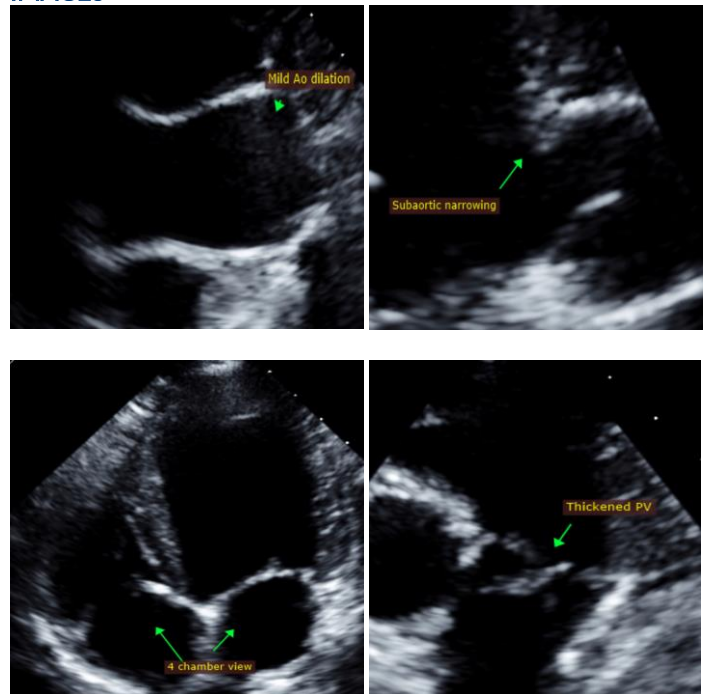
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- Monitor for development of labored breathing, exercise intolerance or collapse episodes, as SAS patients are more predisposed to development of arrhythmias than to CHF.
- Mild exercise restriction is advised lifelong.
- Omega fatty acid supplementation (1000mg 1-2x daily) may be of some long-term benefit for dogs predisposed to arrhythmias.
- If needed, anesthetic risk is mildly elevated. Avoid heart rate stimulating drugs such as atropine or glycopyrrolate unless clinically indicated. Avoid ketamine and acepromazine due to peripheral vascular effects. Mild IV fluid restriction is advised. Recommend prophylactic antibiotics prior to and during any orthopedic or dental procedure in the future given predisposition to endocarditis.

PLAN

- Recommend recheck echocardiogram in 1 year to screen for progression, sooner if any clinical signs arise.

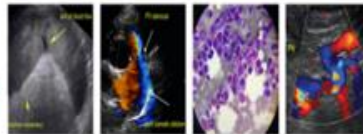
IMAGES



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
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com



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Echocardiogram performed by:

Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)

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