


PRESENTING CLINICAL SIGNS

DATE History: Grade IV/VI left-sided murmur. Cardiomegaly on radiographs. Pre-anesthetic evaluation (dental).

3/31/23

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Dr. Meredith Swart

There is mild left atrial dilation. The mitral valve leaflets are thickened and exhibit mild systolic prolapse. A mild to moderate jet of mitral regurgitation is present. There is borderline 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 appears normal, though trace tricuspid regurgitation is present. 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.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA - 28.3 mm
LVIDd - 25.3 mm
LVIDs - 13.9 mm
FS - 45%
RA - 20.0 mm
LVOT - 1.60 m/s
RVOT - 1.05 m/s

PATIENT

Barkley Fickle

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

BREED

Yorkie

This examination demonstrates mild to moderate regurgitation of blood across Barkley's mitral valve resulting from degenerative valve disease. Secondary to his regurgitation, Barkley has mild dilation of his left atrium and borderline mild dilation of his left ventricle, though his left ventricular systolic function is well-preserved. As only mild left atrial dilation is present, Barkley's current risk for the development of clinical signs secondary to his disease, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be relatively low, though careful monitoring for these signs is recommended going forward.

SEX

MN

Barkley's cardiovascular risk for general anesthesia is mildly increased based on this exam, therefore, some precautions should be taken in order to minimize this risk. I recommend avoiding the use of alpha-2 agonists, ketamine, and telazol in the anesthetic protocol, as well as reducing the IV fluid rate by 25%. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

AGE

14 y

I recommend starting Barkley on pimobendan (1.25 mg BID), as this medication should help to slow the progression of his mitral valve disease, as well as decrease his risk for general anesthesia.

WEIGHT

9.2 lb

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

HOSPITAL NAME

Swart Veterinary
Imaging

REFERRING VET

Dr. Swart



DATE

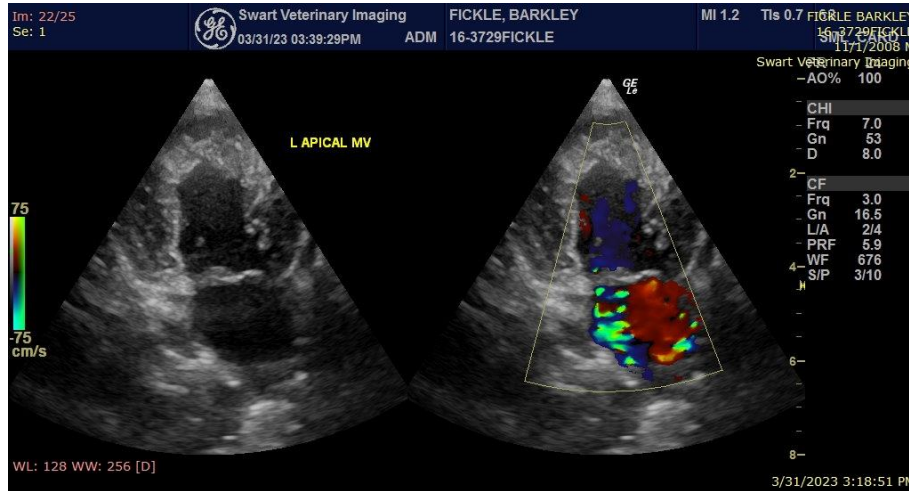
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PATIENT

Barkley Fickle

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.

SPECIES

Canine

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.

Keith Blass, DVM, MS, DACVIM (Cardiology)

KeithBlass@gmail.com

631-804-5754

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Yorkie

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