

PATIENT

Edna Free Kodiak's Pup

SPECIES

Canine

BREED

English Bulldog

SEX

F

AGE

7.5 wk

WEIGHT

8 lb

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Brandi Kurzowski

HOSPITAL NAME

Corfu VC

REFERRING VET

Dr. Gardner

INVOICE

DATE

3/31/26

PRESENTING CLINICAL SIGNS

Abnormal heart sounds.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

Left atrial size is normal. The mitral valve appears normal. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal, though there is mildly increased velocity laminar flow in the ascending aorta. There is moderate right atrial and right ventricular dilation. The tricuspid valve leaflets are thickened, and there is Doppler evidence of tricuspid regurgitation present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

ECG during echo: Sinus rhythm

LA - 15.1 mm
LVIDd - 15.0 mm
LVIDs - 6.0 mm
FS - 60%
RA - 22.4 mm
LVOT - 1.72 m/s
RVOT - 1.28 m/s
TR - 1.55 m/s

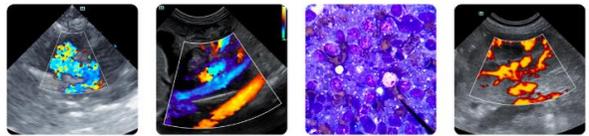
ASSESSMENT/RECOMMENDATIONS

This examination demonstrates moderate dilation of Edna's right heart chambers. As her tricuspid valve leaflets appear to be thickened and Doppler evidence of tricuspid regurgitation is present, it appears that tricuspid valve dysplasia is contributing to Edna's chamber dilation, however, it's unclear whether another abnormality, such as a shunting lesion could also be present. Given the presence of moderate right heart chamber dilation, Edna is at moderately increased risk for the development of right-sided congestive heart failure, therefore, careful monitoring for pleural and/or peritoneal effusion formation is recommended.

I recommend starting Edna on pimobendan (~0.25 mg/kg BID), as this medication may help to slow the progression of her right heart chamber dilation.

Ideally, consultation with a cardiologist would be pursued to more comprehensively evaluate for the presence of a concurrent congenital heart disease. If not possible, the acquisition of additional images is recommended.

If additional images are not acquired, a recheck echocardiogram is recommended in 3 months.



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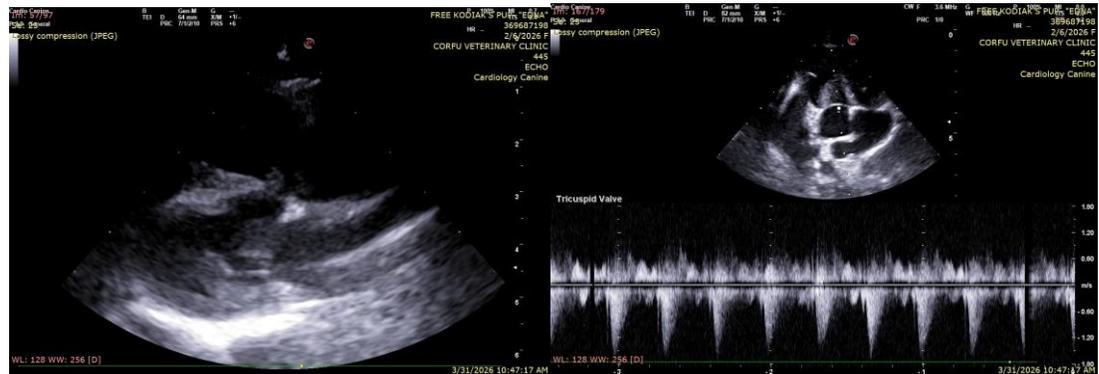
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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) info@SonoPath.com