


PRESENTING CLINICAL SIGNS

DATE History: Heart murmur present since birth. Pre-anesthetic evaluation (OVH, dental). Asymptomatic.

3/4/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

There is mild to moderate left atrial dilation. The mitral valve leaflets are mildly thickened, and a mild jet of mitral regurgitation is present. There is moderate left ventricular hypertrophy. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. The aortic valve leaflets subjectively appear thickened, and there is turbulent systolic flow across the valve (the true velocity of flow is underestimated, as the velocity is above the upper limit of the measuring scale used). Trace aortic insufficiency is present. 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 pericardial effusion or cardiac masses are seen.

PATIENT

Skye Romero

LA - 31.2 mm
IVSd - 10.0 mm
LVPWd - 10.0 mm
LVIDd - 22.1 mm
LVIDs - 12.8 mm
FS - 42%
LVOT - >3.85 m/s
RVOT - 0.81 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS
BREED

Maltese Mix

This examination demonstrates turbulent systolic flow across Skye's aortic valve. As her valve leaflets subjective appear thickened, it appears that Skye may be suffering from congenital aortic valve stenosis. Secondary to her stenosis, Skye has moderate hypertrophy of her left ventricle, as well as mild to moderate dilation of her left atrium. Given these findings, Skye is at risk for the development of exercise intolerance and syncope, as well as arrhythmia formation, and she could become at risk for the development of left-sided congestive heart failure if she experiences progressive left atrial dilation over time.

SEX

FI

Also seen in this exam is mild mitral regurgitation resulting from degenerative valve disease.

AGE

7 y

It's difficult to say based on the images provided whether Skye would be a good candidate for aortic balloon valvuloplasty, though, if true valvular stenosis is present, it's possible that she could be. Referral to a cardiologist that performs this procedure is recommended, if possible, for further evaluation.

WEIGHT

10.9 lb

I hesitate to start any medical therapy at this time, as therapy with atenolol, which could potentially reduce her risk for syncope, arrhythmias formation, and progressive left ventricular hypertrophy, could increase Skye's risk for developing left-sided congestive heart failure, while therapy with pimobendan, which could potentially slow the progression of Skye's left atrial dilation, could make her stenosis worse.

HOSPITAL NAME

Swart Veterinary
Imaging

Skye's cardiovascular risk for general anesthesia is mildly to moderately, bordering on moderately, increased based on this exam, therefore, precautions should be taken in order to minimize this risk. I recommend avoiding the use of alpha-2 agonists, ketamine, telazol, acepromazine, and, if possible, anticholinergics in the anesthetic protocol, as well as reducing the IV fluid rate by 25-50%. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

REFERRING VET

Dr. Swart



DATE A recheck echocardiogram is recommended in 6 months if referral is not pursued.

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PATIENT

Skye Romero

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WEIGHT

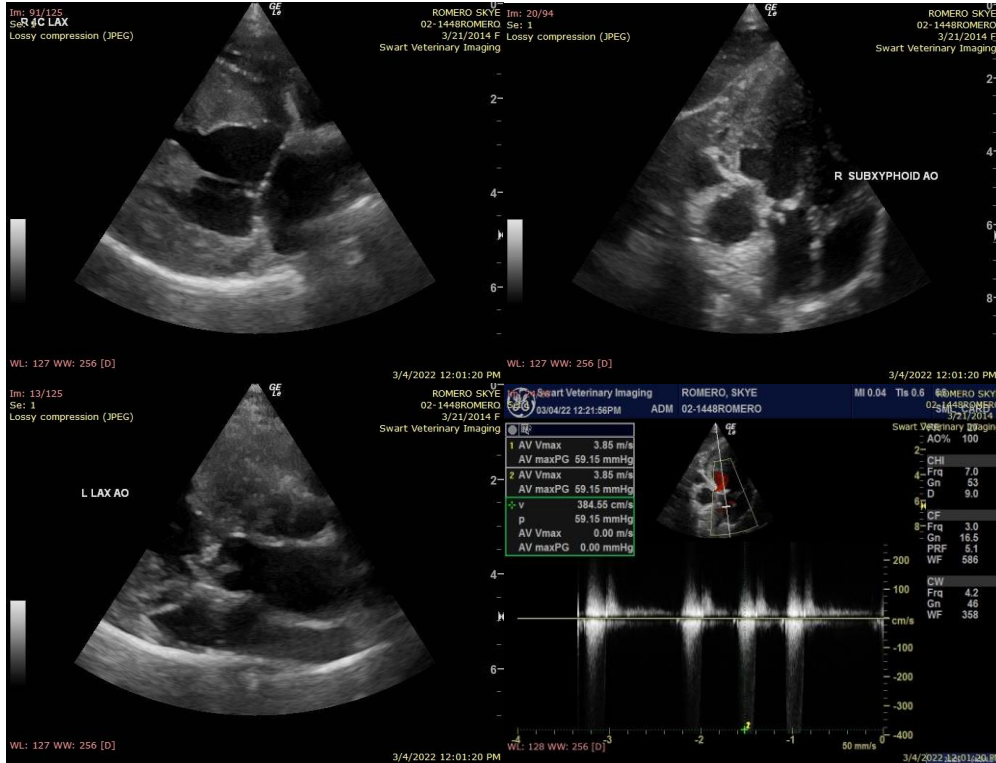
10.9 lb

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REFERRING VET

Dr. Swart



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. 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)

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