


PATIENT

Coco Gorniak

PRESENTING CLINICAL SIGNS

History: Chronic grade 4/6 heart murmur. Recent episodes of syncope/fainting. Sedated with Torb/Midaz.

SPECIES

Canine

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Severe diffuse nodular thickening of mitral valve leaflets. Mild prolapse into the left atrial lumen. Severe eccentric mitral regurgitation with severe left atrial enlargement. Mild LV dilation with increased sphericity and hyperdynamic myocardial function. Evidence of volume overload. The tricuspid valve appears mildly thickened with trace tricuspid regurgitation. Normal velocity. No significant right heart enlargement. The pulmonic and aortic valves appear normal in appearance and mobility. Normal pulmonic and aortic outflow velocities. No aortic or pulmonic insufficiency noted. No pericardial or pleural effusion seen.

BREED

Cockapoo Mix

SEX

Female Spayed

CARDIAC CHART
AGE

16 years

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	5.5	2.5	NM	2.5	59	89	0.3
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	120	NM	1.3	11.9	3.5	3.8	1.6
*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)

IMAGING PERFORMED BY

Crystal Hill, RVT

HOSPITAL NAME

Campbellville Animal Hospital

REFERRING VET

Dr. Kamrani

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chronic degenerative valve disease causing severe mitral and trace tricuspid regurgitation. Severe left atrial and ventricular enlargement indicates there is an elevated risk for spontaneous congestive heart failure. A small aortic leak is noted, and baseline blood pressure is recommended. No additional issues are identified.

INVOICE

29446

DATE

3/7/23

Syncope (assuming it was exertional) in this patient is most likely cardiogenic in origin. Possible causes include poor forward blood flow leading to hypoxia, early CHF, severe pulmonary hypertension (not seen), an arrhythmia and/or blood pressure swings, etc. In light of severity of disease on echocardiogram, there is concern this patient is progressing



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to early congestive heart failure and full lifelong cardiac supportive therapy is warranted as below. If the episodes continue despite therapy, other causes should be considered. Long term prognosis is guarded to poor; however, most dogs are able to maintain a good QOL on medications for an average of 8-12 months.

SPECIES

Canine

Monitoring of sleeping respiratory rates will be paramount to screen for congestive heart failure at home. Omega fatty acid supplementation and mild salt restriction may also be of some long-term benefit. Monitor for development of a cough, labored breathing, exercise intolerance or worsening collapse episodes in the future.

BREED

Cockapoo Mix

Elective anesthesia is not advised, as there is high risk for complication.

SEX

Female Spayed

PLAN

Screening BP, CXR and ECG are recommended. Institute furosemide 1mg/kg PO q12h. Institute Pimobendan 0.3mg/kg PO q12h. Assuming BP >130mmHg, institute ACE-inhibitor Enalapril or Benazepril 0.5mg/kg PO q12h. If exertional syncope persists, highly recommend further evaluation.

AGE

16 years

Monitor SRRs at home. Monitor renal values in 10-14 days, then every 3-4 months while on diuretics.

WEIGHT

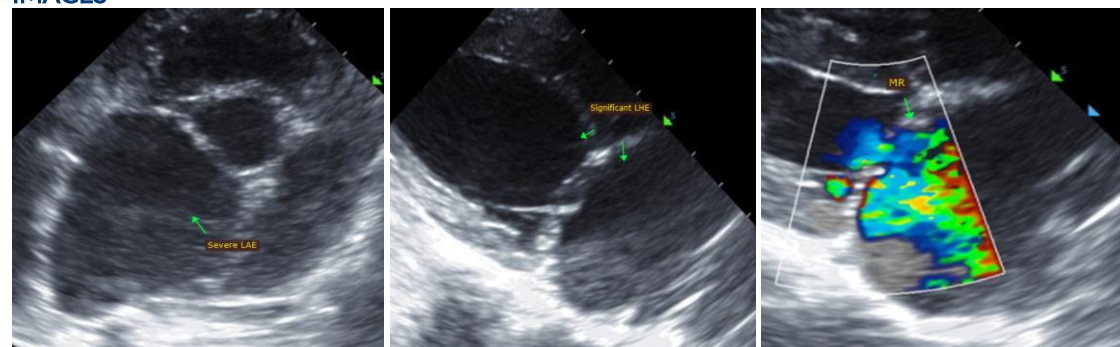
26.2lbs

Recommend conservative monitoring with a recheck echocardiogram in 4-6 months, sooner if any development of associated clinical signs occurs in the interim.

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

IMAGES



IMAGING PERFORMED BY

Crystal Hill, RVT

HOSPITAL NAME

Campbellville Animal
Hospital

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.

REFERRING VET

Dr. Kamrani

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

29446

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DATE

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