



PATIENT

Gabby Hobbs

SPECIES

Canine

BREED

Alapaha Blue Blood Dog

SEX

Female Sapyed

AGE

6 years

WEIGHT

27.3kgs

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY

Nigel Gumley, DVM

HOSPITAL NAME

Cedarview Animal Hospital

REFERRING VET

Dr. Limbrick

INVOICE

22977

DATE

3/8/22

PRESENTING CLINICAL SIGNS

History: Recently noted a systolic grade 1 to 3 systolic heart murmur, appears to be dynamic and more obvious with increased heart rate. Not audible today when relaxed.

-Abnormal PE/Chem/CBC/UA Results: ECG showed mild left axis shift; sinus tachycardia (HR = 203), otherwise normal. Increased T. bili (40), urea, TP (mild). Normal heart sounds today, MM pink, lungs normal, femoral pulse normal. Otherwise, healthy

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Mild mitral valve leaflet thickening with no obvious prolapse into the left atrial lumen. No mitral regurgitation is identified. Normal left atrial dimension. Normal LV diameter with normal myocardial function. Mild LV hypertrophy (1.3cm). The tricuspid valve appears subjectively normal. Trace TR. The right heart is normal. No overt evidence of pulmonary arterial hypertension. The pulmonic and aortic valves are normal in morphology and mobility. No aortic abnormalities identified, with normal outflow velocity. Normal pulmonic outflow velocities. No aortic insufficiency. No pulmonic insufficiency. No pericardial or pleural effusion noted. No cardiac tumors observed.

CARDIAC CHART

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			1.0	1.2	38	70	0.39
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	NM	1.3	0.6	27.3	2.4	2.9	1.8
*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)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The only abnormality identified is mild LV hypertrophy. This is of unknown significance although notably unusual to see in a middle-aged dog. A baseline blood pressure is strongly recommended. The remainder of the cardiac structure and function remain normal, and no cause of a murmur is identified. No significant valvular insufficiencies were noted and flow through both great vessels are normal. In the absence of significant volume changes (dehydration) or anemia, other



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possibilities include a physiologic flow murmur only present with elevated heart rates, or a small flow abnormality not seen here. Given LV hypertrophy, an intermittent obstruction is a possibility and follow up is advised. It is reasonable to monitor periodically via recheck echocardiography in the future, particularly should the murmur persist/progress.

SPECIES

Canine

No cardiac medications are indicated at this time. Monitor for any development of cough, labored breathing or exercise intolerance.

BREED

Alapaha Blue Blood
Dog

No cardiac contraindication for general anesthesia.

PLAN

Baseline BP and lab work recommended.

SEX

Female Sapyed

Recommend recheck echocardiogram in 1 year to screen for any progressive changes.

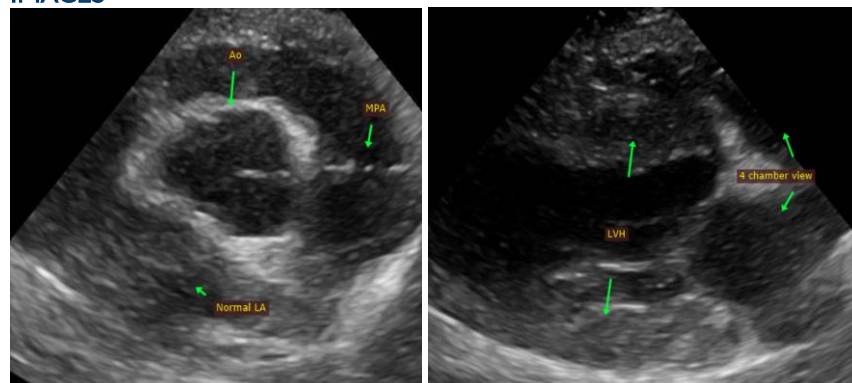
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IMAGES



INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

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.

IMAGING PERFORMED BY

Nigel Gumley, DVM

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.

HOSPITAL NAME

Cedarview Animal
Hospital

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