



PATIENT

Mocca Bonilla

SPECIES

Canine

BREED

Bichon Mix

SEX

MN

AGE

15 y

WEIGHT

9.5 kg

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Holliday VH

REFERRING VET

Dr. Minardi

INVOICE

DATE

4/13/26

PRESENTING CLINICAL SIGNS

Collapsed suddenly at home after being restless after a walk. Vomited, then proceeded to temporarily lose consciousness. Came to within a minute and immediately lost control of bladder. Recovered fully within 2 minutes. Grade IV/VI murmur first noted in 2021. Neuro exam unremarkable. HR 156.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

There is moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. A moderate to severe jet of eccentric mitral regurgitation is present. There is moderate left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal, though very mild aortic insufficiency is present. 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 pericardial effusion or cardiac masses are seen.

ECG during echo: Sinus rhythm

LA – 39.0 mm
LVIDd – 41.1 mm
LVIDs – 17.2 mm
FS – 58.2%
RA – 19.4 mm
LVOT – 2.17 m/s
RVOT – 0.99 m/s

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease – stage B2

This examination demonstrates moderate to severe regurgitation of blood across Mocca's mitral valve resulting from degenerative valve disease. Secondary to his regurgitation, Mocca has moderate dilation of both his left atrium and left ventricle, though his left ventricular systolic function is well-preserved. As Mocca vomited prior to his syncopal episode, a vasovagal reflex is likely the main differential, however, the severity of Mocca's mitral valve disease indicates that this should also be considered as a possible cause, as should an arrhythmia and pulmonary hypertension. In addition to syncope, Mocca is at moderately increased risk for the development of left-sided congestive heart failure, therefore, careful monitoring of his respiratory rate/effort is recommended.

I recommend starting Mocca on pimobendan (2.5 mg BID), as this medication should help to slow the progression of his mitral valve disease, as well as reduce his risk for syncope secondary to his mitral regurgitation.

An ECG and/or Holter/event monitor is recommended if Mocca experiences additional collapsing episodes.



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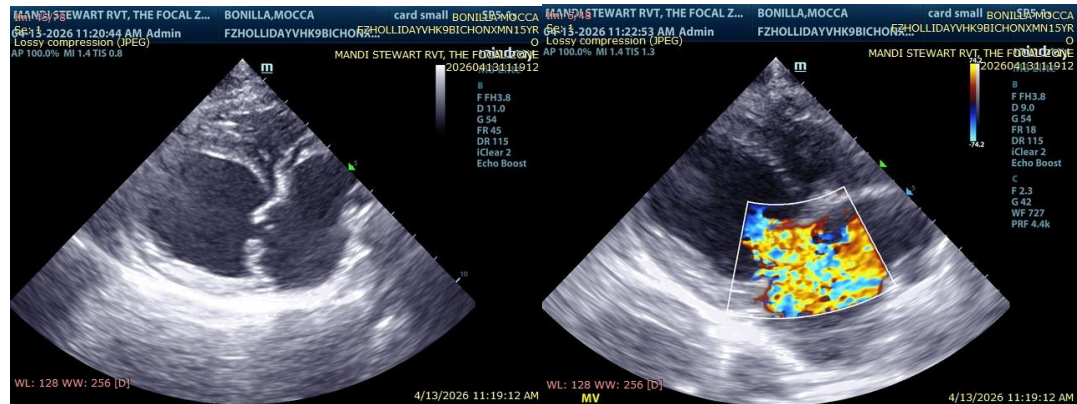
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A recheck echocardiogram is recommended in 6 months. Thoracic radiographs are recommended if Mocca experiences respiratory clinical signs.



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