


**PRESENTING CLINICAL SIGNS**

**DATE** History: Strong positive heartworm test. Squeaky apical murmur. Asymptomatic.

4/26/23 **ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:** Left atrial size is normal. The mitral valve is normal. Left ventricular wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. There is mild narrowing of the left ventricular outflow tract, and there is turbulent flow in the outflow tract, the velocity of which is consistent with the presence of moderate subvalvular stenosis (PG 78.6 mmHg). The aorta and aortic valve are normal. 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 heartworms are visualized. No pericardial effusion or cardiac masses are seen.

Dr. Meredith Swart

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

**PATIENT**

Bruni Hayko

**SPECIES**

Canine

LA - 34.8 mm  
IVSd - 10.8 mm  
LVPWd - 10.5 mm  
LVIDd - 36.1 mm  
LVIDs - 23.8 mm  
FS - 34%  
RA - 24.0 mm  
LVOT - 4.43 m/s  
RVOT - 1.47 m/s

**ASSESSMENT/RECOMMENDATIONS**

Subaortic stenosis (SAS)

**BREED**

Pit Bull Mix

This examination demonstrates mild narrowing of Burni's left ventricular outflow tract, consistent with the presence of SAS. The velocity of flow across Burni's outflow tract indicates that her stenosis is moderate, and she does not have secondary dilation of her left ventricle. Many dogs with this degree of stenosis will remain asymptomatic for their disease, though some will experience clinical signs, such as exercise intolerance and syncope, while a smaller percentage can develop ventricular arrhythmias that could potentially result in sudden death.

**SEX**

FS

No heartworms are visualized in this exam, indicating that Burni's worms appear to be limited to her peripheral pulmonary arteries at this time.

**AGE**

4 y

Recommended therapy for Burni's SAS is atenolol (25 mg BID). Avoidance of very high-intensity exercise is recommended going forward (strict exercise restriction is recommended throughout Burni's heartworm treatment).

**WEIGHT**

66 lb

As SAS is associated with a higher risk for the development of aortic valve endocarditis, prophylactic antibiotic therapy is recommended any time there is a risk for systemic bacteremia developing.

**HOSPITAL NAME**

Swart Veterinary  
Imaging

No contraindication to heartworm adulticide therapy following a four-week course of doxycycline is appreciated in this exam.

**REFERRING VET**

Dr. Swart

A recheck echocardiogram is recommended in 12 months, sooner if new clinical signs compatible with cardiac dysfunction develop.



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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.

SPECIES

Canine

Keith Blass, DVM, MS, DACVIM (Cardiology)  
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631-804-5754

BREED

Pit Bull Mix

SEX

FS

AGE

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WEIGHT

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HOSPITAL NAME

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