


PRESENTING CLINICAL SIGNS

DATE History: Heart murmur present for over a year. Started experiencing exercise intolerance and suspected syncopal episodes last month. Radiographs showed cardiomegaly, some perihilar edema, and mainstem bronchial compression. Started on pimobendan.
 4/27/22

ECHOCARDIOGRAPHIC FINDINGS

PERFORMED BY: 2D, M-mode, and Doppler study.

Dr. Meredith Swart There is moderate to severe left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. There is Doppler evidence of mitral regurgitation present. There is moderate left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and there is Doppler evidence of tricuspid regurgitation present. TR velocity (TR 3.73 m/s) is consistent with the presence of moderate pulmonary hypertension (PG 55.5 mmHg). The pulmonary artery and pulmonic valve are normal. Trace pericardial effusion is present. No cardiac masses are seen. Peritoneal effusion is present.

INTERPRETED BY
 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

PATIENT LA - 39.9 mm
 LVIDd - 36.4 mm
 LVIDs - 19.8 mm
 FS - 45.6%
 LVOT - 1.70 m/s
 RVOT - 0.86 m/s
 TR - 3.73 m/s

Bella Oram

Canine

ASSESSMENT/RECOMMENDATIONS

BREED Degenerative mitral and tricuspid valve disease
 Pulmonary hypertension

Maltese Mix This examination demonstrates regurgitation of blood across Bella's mitral and tricuspid valves resulting from degenerative valve disease. Bella's tricuspid valve disease is mild, as evidenced by her absence of secondary right heart chamber dilation. Her mitral valve disease is more advanced, as Bella has moderate to severe dilation of her left atrium and moderate dilation of her left ventricle, as well as moderate secondary pulmonary hypertension. Bella's mitral valve disease and pulmonary hypertension are both advanced enough to be able to result in exercise intolerance and syncope, therefore, both are likely contributing to Bella's clinical signs. Her mitral valve disease is also advanced enough to be able to result in cardiogenic pulmonary edema, while her pulmonary hypertension is advanced enough to result in right-sided congestive heart failure (despite the absence of right heart chamber dilation), therefore, Bella appears to be experiencing biventricular congestive heart failure.

SEX

FS

AGE

14 y

Abdominocentesis is recommended to rapidly remove Bella's peritoneal effusion.

WEIGHT

14 lb

Continued use of pimobendan (2.5 mg am, 1.25 mg pm) is warranted based on this exam, as is therapy with furosemide (12.5 mg BID), enalapril (3.75 mg BID), spironolactone (6.25 mg BID), and sildenafil (10 mg BID-TID).

HOSPITAL NAME

Swart Veterinary
 Imaging

A recheck physical exam and renal/electrolyte profile are recommended in 1 week. A recheck echocardiogram is recommended in 4-6 months.

REFERRING VET

Dr. Swart



DATE

4/27/22

PERFORMED BY:

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

PATIENT

Bella Oram

SPECIES

Canine

BREED

Maltese Mix

SEX Keith Blass, DVM, MS, DACVIM (Cardiology)

KeithBlass@gmail.com

FS 631-804-5754

AGE

14 y

WEIGHT

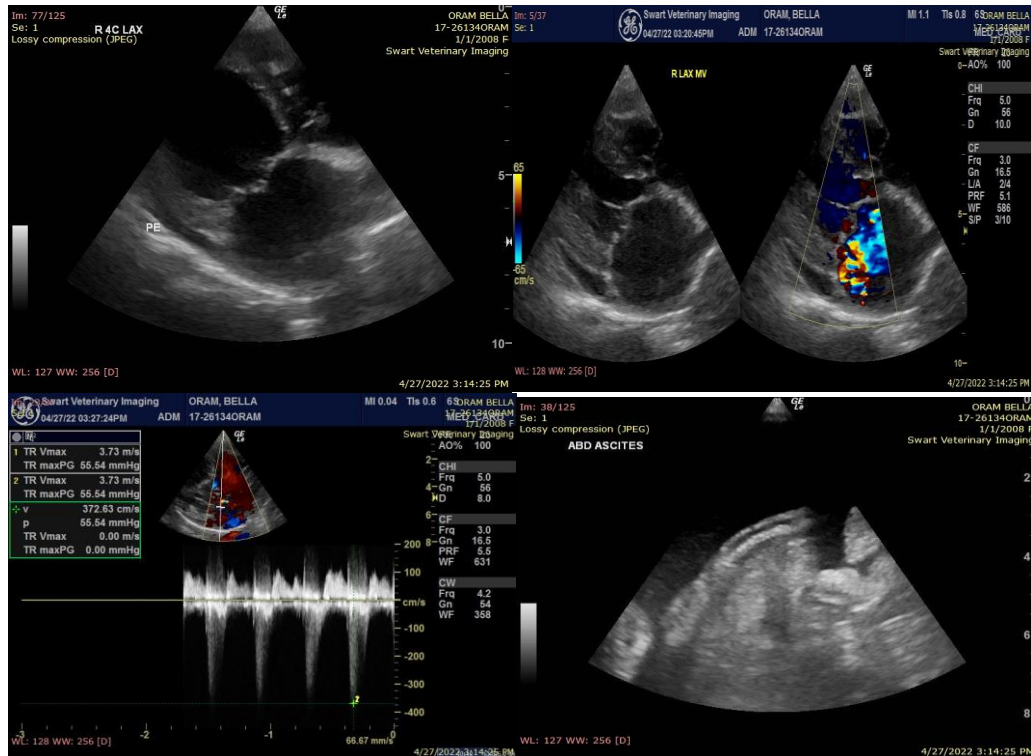
14 lb

HOSPITAL NAME

Swart Veterinary
Imaging

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.