


PRESENTING CLINICAL SIGNS

DATE History: Diagnosed with presumptive DCM at ER ~1 month ago. Started on furosemide 60 mg BID and pimobendan 7.5 mg BID, and has been doing well since then.

4/27/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Dr. Meredith Swart

There is mild to moderate left atrial dilation. The mitral valve appears normal, though trace mitral regurgitation is present. There is moderate left ventricular dilation. Left ventricular systolic function is moderately to severely depressed. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal. The pulmonary artery and pulmonic valve are normal. No pericardial effusion or cardiac masses are seen.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA - 52.4 mm
LVIDd - 58.1 mm
LVIDs - 48.6 mm
FS - 16%

PATIENT

Penny Jones

RA - 43.1 mm
LVOT - 0.86 m/s
RVOT - 0.81 m/s

ASSESSMENT/RECOMMENDATIONS

SPECIES Dilated cardiomyopathy (DCM)

Canine

This examination demonstrates moderate to severe depression of Penny's left ventricular systolic function, consistent with the presence of DCM. It's possible that Penny could be suffering from a primary genetic-based form of the disease, though consideration should also be given to the presence of a diet-associated cardiomyopathy if Penny has been receiving one that has been linked to the development of myocardial dysfunction (ex. grain-free). Secondary to her myocardial dysfunction, Penny has mild dilation of her left atrium and moderate dilation of her left ventricle. Given these findings, it's possible that Penny could have experienced an episode of left-sided congestive heart failure (CHF) last month (if she experienced an elevated respiratory rate/effort), and she is at risk for the development of exercise intolerance, syncope, arrhythmia formation, and right-sided CHF.

BREED

Labrador Retriever

SEX

FS

A diet change would be warranted if Penny is receiving one that has been linked to the development of myocardial dysfunction, as would a whole blood or plasma taurine level.

AGE

9 y

Penny's current therapy with pimobendan is warranted based on this exam, as is therapy with enalapril (15 mg BID) and spironolactone (37.5 mg am, 25 mg pm). Continued use of furosemide would be warranted if Penny previously experienced clinical signs that improved with therapy.

WEIGHT

71 lb

A renal/electrolyte profile is recommended in 1-2 weeks. A recheck echocardiogram is recommended in 6 months. Thoracic/abdominal radiographs are recommended if clinical signs compatible with congestive heart failure develop.

HOSPITAL NAME

Swart Veterinary
Imaging

REFERRING VET

Dr. Swart



DATE

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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.

PATIENT

Penny Jones

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

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631-804-5754

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