


PATIENT PRESENTING CLINICAL SIGNS

Ozzie Tkach History: Tachypnea and exercise intolerance. Has been on Caninsulin, Fortekor (last given April 3rd am).

SPECIES Canine
 -Abnormal PE/Chem/CBC/UA Results: Urine Sp grav 1.026, 3+glucose on urine, pH5.5, protein 3+, ketones negative, blood trace. Platelet count 527, PCV/TP 45/58. Retics low, WBCs 18.9(4.9-17.6)Neuts 16.7(2.9-12.7)Platelets high 527, Glucose 22.0(3.5-5.3), SDMA 15, Urea 16.3, Potassium 6.2(4.0-5.4) Na:K ratio 23(28-37) Albumin 24 (27-39) ALT 14(18-121) Urine protein/creatinine ratio 5.7(0-0.2) Total T4 normal, Fructosamine 362(177-314)

BREED

West Highland Terrier

SEX

Male Neutered

AGE

12 years

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Normal mitral valve leaflets with no prolapse into the left atrial lumen. Trace mitral regurgitation with no left atrial dilation. Normal LV diameter with adequate myocardial function. The tricuspid valve appears normal with no obvious tricuspid regurgitation. Normal right atrial and ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No obvious aortic or pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

CARDIAC CHART
WEIGHT

19.2lbs

INTERPRETED BY

 Maggie Machen Lamy,
 DVM DACVIM
 (Cardiology)

IMAGING PERFORMED BY

Crystal Hill, RVT

HOSPITAL NAME

 Chippawa Animal
 Hospital

REFERRING VET

Dr. Dowell

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	NM	NA	1.2	1.2	50	84	0.3
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	160	1.5	1.2	8.7	1.8	2.1	1.0
*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)
*Note: All measurements based upon multi-modal images and methods. An average value is reported.				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

Overtly normal cardiac dimensions and function, with no obvious dysfunction or dilation of the left heart. No significant valvular leaks are visualized, and no evidence of pulmonary hypertension.

INVOICE

30032

DATE

4/4/23



PATIENT

Ozzie Tkach

No cardiac medications are indicated at this time as the cough appears non-cardiac in origin (given the breed, pulmonary fibrosis is highly suspected). Continued work up for infectious/inflammatory respiratory causes is recommended. Options include Baytril or similar antibiotic, anti-inflammatory prednisone, aggressive hydrocodone, theophylline trial, etc. If refractory, may consider TTW/BAL for further information.

SPECIES

Canine

Even though no significant pulmonary hypertension is seen in this study, this could certainly develop going forward. Monitor for signs of exertional syncope or collapse. Monitor for signs of exertional syncope or dyspnea. If these arise, Sildenafil should be instituted as below.

BREED

West Highland Terrier

SEX

Male Neutered

Monitor for development of a heart murmur, cough, labored breathing, exercise intolerance or collapse episodes.

AGE

12 years

Further respiratory evaluation/treatment as discussed. If exertional dyspnea or collapse is noted, institute Sildenafil 1-2mg/kg PO q8-12h.

A recheck echocardiogram is recommended in 6-12 months.

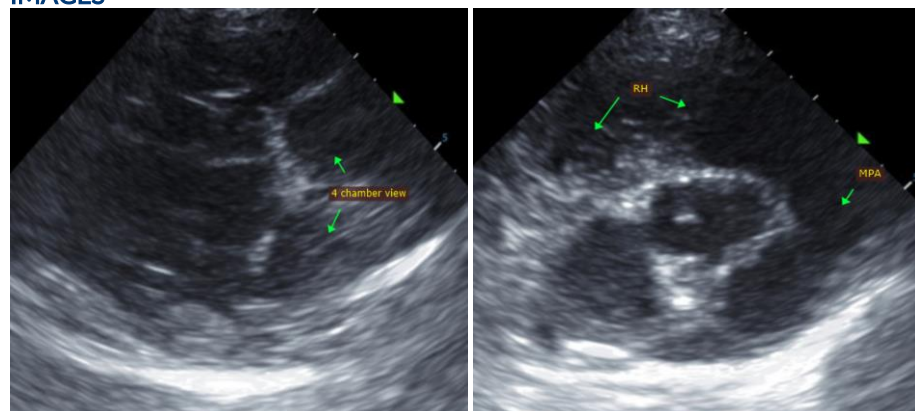
WEIGHT

19.2lbs

IMAGES

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)



IMAGING PERFORMED BY

Crystal Hill, RVT

HOSPITAL NAME

Chippawa Animal
Hospital

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.

REFERRING VET

Dr. Dowell

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.

INVOICE

30032

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

DATE

4/4/23