



PATIENT

Babe Ruth Corcoran

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

Male Neutered

AGE

11 years

WEIGHT

20.7lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Norfolk County
Veterinary Service

REFERRING VET

Dr. Ragon

INVOICE

30116

DATE

4/6/23

PRESENTING CLINICAL SIGNS

History: Recheck echo. History chronic valvular disease- Stage B2. Babe Ruth coughs regularly. BP: 150-160mmHg. Current meds: 1) Vetmedin 2.5 mg BID, 2) Spironolactone 15 mg- 1/2 BID, 3) Enalapril 2.5 mg - 1.5 BID.
-Pertinent previous echo findings (9/15/22 MML): LA 3.3 cm, LA:Ao 2.2, LV 3.3 cm, severe LAE, moderate LVE, severe MR, mild TR (2.6 m/s).

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is moderately increased with hyperdynamic function. LV wall thicknesses are normal.

Left atrium: The left atrium is marked dilated.

Mitral valve: The mitral valve is diffusely thickened with mild prolapse into the left atrial lumen. Marked eccentric mitral regurgitation with a normal velocity.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears mildly thickened with mild tricuspid regurgitation. Normal velocity.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 140bpm.

2-Dimensional Measurements

Ao diam (cm)	1.4
LA diam (cm)	3.7
LA:Ao (Swe)	2.7
IVS thickness (cm)	0.8
LVID diastole (cm)	3.7
PW thickness (cm)	0.8
LVID systole (cm)	1.7
FS (%)	53

Doppler Measurements

PV Vmax (m/s)	0.7
AoV Vmax (m/s)	1.6
MR Vmax (m/s)	5.7
TR Vmax (m/s)	2.5
TR PG (mmHg)	25

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease persists with continued progression in left heart dilation. The disease is marked with progressive MR. No additional issues have developed.

Given continued progression despite supportive care, recommend low dose Lasix going forward. The cough remains unlikely to be due to CHF; however, the risk is exceedingly high. Hydrocodone or an alternative cough suppressant should be considered for long-term benefit.

Prognosis is guarded to poor long-term with risk for spontaneous CHF, development of malignant arrhythmias, and/or sudden death in the future.



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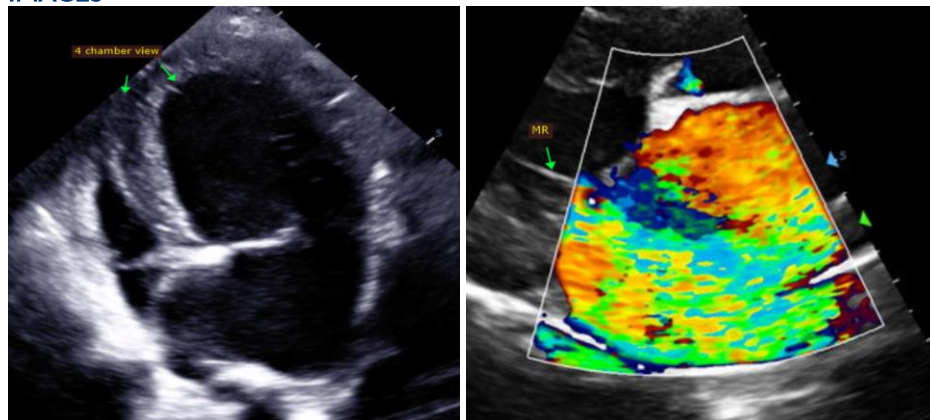
RECOMMENDATIONS

- Recommend low-dose Lasix 1mg/kg PO q12h.
- Continue Pimobendan, Spironolactone and Enalapril as prescribed.
- Monitor renal values and BP every 3-4 months lifelong.
- Consider Hydrocodone for quality of life.
- Elective anesthesia is not advised.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

IMAGES



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. 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.

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

Echocardiogram performed by: Pamela Harrigan, RDCS
 Pet Animal Ultrasound Service (4paus.com)