



**PRESENTING CLINICAL SIGNS**

History: Pre-anesthetic evaluation. Radiographs show an enlarged cardiac silhouette. Coughing due to collapsing trachea.

**DATE**

4/6/23

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**

Shari Reffi, CVT

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

There is mild left atrial dilation. The mitral valve leaflets are mildly thickened, and there is Doppler evidence of mitral regurgitation present. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. 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.

LA - 23.0 mm  
LVIDd - 21.5 mm  
LVIDs - 11.6 mm  
FS - 46%  
RA - 16.9 mm  
LVOT - 1.34 m/s  
RVOT - 0.86 m/s

**PATIENT**

Dash Alvarez

**ASSESSMENT/RECOMMENDATIONS**

Degenerative mitral valve disease

**SPECIES**

Canine

This examination demonstrates regurgitation of blood across Dash's mitral valve resulting from degenerative valve disease. Secondary to his regurgitation, Dash has mild dilation of his left atrium, though his left ventricular dimensions are normal, and his left ventricular systolic function is well-preserved. As only mild left atrial dilation is present, Dash's mitral valve disease does not appear to be contributing to his cough, and his risk for other clinical signs of cardiac dysfunction, such as exercise intolerance, syncope, and labored breathing, appears to be relatively low.

**BREED**

Yorkie

**SEX**

MI

Dash's cardiovascular risk for general anesthesia is mildly increased based on this exam, therefore, some precautions should be taken in order to minimize this risk. I recommend avoiding the use of alpha-2 agonists, ketamine, and telazol in the anesthetic protocol, as well as reducing the IV fluid rate by 25%. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

**AGE**

11 y

I recommend starting Dash on pimobendan (1.25 mg am, 0.625 mg pm), as this medication should help to slow the progression of his mitral valve disease, as well as decrease his risk for general anesthesia.

**WEIGHT**

6.16 lb

A recheck echocardiogram is recommended in 9 months to monitor for disease progression.

**HOSPITAL NAME**

Heart and Paw

**REFERRING VET**

Dr. Marmolejo



DATE

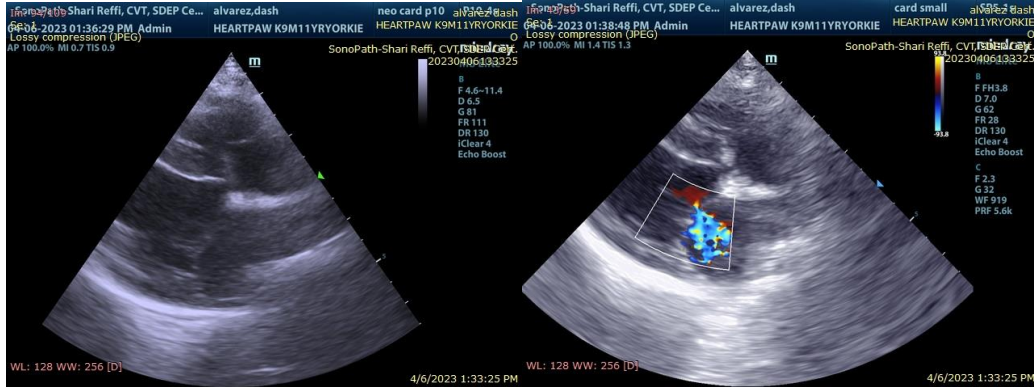
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

PATIENT

Dash Alvarez

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.

Keith Blass, DVM, MS, DACVIM (Cardiology)

KeithBlass@gmail.com

631-804-5754

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