



RESENTING CLINICAL SIGNS

History: Syncopal episodes. Enlarged cardiac silhouette in radiographs.

DATE

4/7/23

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Jenn

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve leaflets are mildly thickened, and a mild to moderate jet of eccentric mitral regurgitation is present. Left ventricular dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Hazel Tobias

LA - 33.8 mm
LVIDd - 33.9 mm
LVIDs - 21.0 mm
FS - 38%
RA - 26.9 mm
LVOT - 1.88 m/s
RVOT - 0.70 m/s
TR - 2.77 m/s

SPECIES

Canine

BREED

CKCS

SEX

FS

AGE

8 y

WEIGHT

40 lb

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Bednar

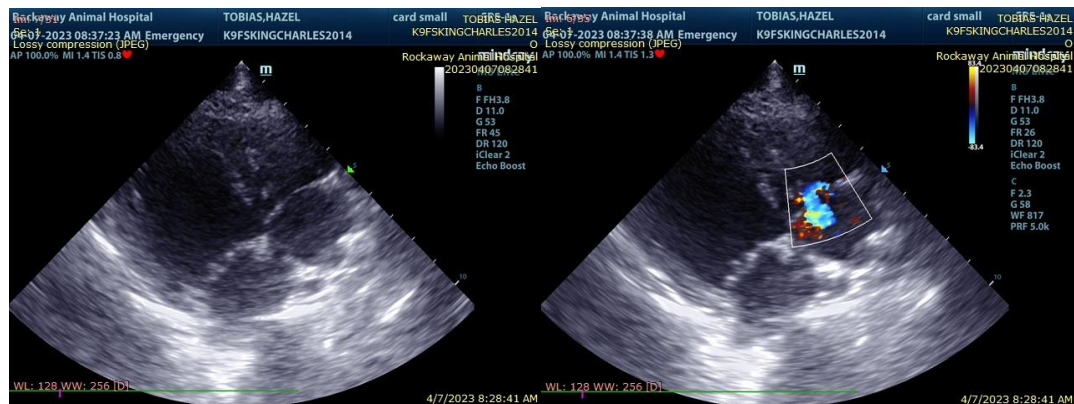
ASSESSMENT/RECOMMENDATIONS

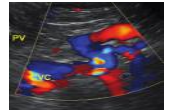
This examination demonstrates regurgitation of blood across Hazel's mitral and tricuspid valves resulting from degenerative valve disease. The hemodynamic effects of each of the regurgitations appear to be mild, as Hazel does not have secondary dilation of any of her cardiac chambers, and her ventricular systolic function is normal. As such, Hazel's valvular diseases appear to be well-compensated, and they are unlikely to be the cause of her syncopal episodes, with vasovagal syncope and an arrhythmia being the most likely differentials.

No therapy is recommended at this stage of Hazel's valvular diseases.

An ECG and/or Holter/event monitor is recommended to further evaluate Hazel's syncopal episodes.

A recheck echocardiogram is recommended in ~6 months.





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.

PERFORMED BY:

Jenn

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.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

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