



PATIENT

Mush Mush Zimmer

SPECIES

Canine

BREED

Mexican Hairless

SEX

MN

AGE

19 y

WEIGHT

9.4 lb

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Graham Sager-
Gellerman, DVM

HOSPITAL NAME

Back Bay VC

REFERRING VET

Dr. Gurian

INVOICE

DATE

4/7/26

PRESENTING CLINICAL SIGNS

Recheck degenerative valve disease. Receiving enalapril 2.5 mg BID, pimobendan 1.25 mg BID, amlodipine 0.4 mg SID, and Hycodan 1.25 mg PRN.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

Left atrial size is normal. The mitral leaflets are mildly thickened and exhibit mild systolic prolapse. A mild jet of mitral regurgitation is present. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve appear normal, though trace aortic insufficiency is present. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and a mild to moderate jet of tricuspid regurgitation is present. TR velocity is consistent with the presence of mild pulmonary hypertension (PG 47.6 mmHg). The pulmonary artery and pulmonic valve appear normal, though there is mildly increased flow velocity in the main pulmonary artery. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

ECG during echo: Sinus rhythm

LA - 23.5 mm
LVIDd - 19.9 mm
LVIDs - 12.7 mm
FS - 36.2%
RA - 17.0 mm
LVOT - 1.69 m/s
RVOT - 1.15 m/s
TR - 3.45 m/s

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease
Pulmonary hypertension

This examination demonstrates no progression of Mush Mush's mitral valve disease over the past 6 months. As such, his risk for the development of a cough or labored breathing secondary to his disease still appears to be low.

Also seen in this exam is mild to moderate regurgitation of blood across Mush Mush's tricuspid valve resulting from degenerative valve disease. The hemodynamic effects of the regurgitation appear to be mild, as Mush Mush does not have secondary dilation of his right heart chambers, indicating that his current risk for the development of right-sided congestive heart failure appears to be low.

Mush Mush's tricuspid regurgitation velocity is consistent with the presence of mild pulmonary hypertension. Mild pulmonary hypertension is typically well-tolerated in dogs, though careful monitoring for the development of exercise intolerance and/or syncope is recommended.

Continued use of pimobendan is recommended at this time. No specific indication for enalapril is appreciated in the image set, though it may be continued if used for a different reason. No therapy is recommended for Mush Mush's pulmonary hypertension at this time.

A recheck echocardiogram is recommended in 6 months.



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

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) info@SonoPath.com