



PRESENTING CLINICAL SIGNS

History: Ventricular arrhythmia noted on routine ECG screening. Started on sotalol. Recheck ECG showed no abnormalities.

DATE

5/10/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Tom McNeill

Left atrial size is normal. 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 normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA - 45.0 mm
LVIDd - 44.8 mm
LVIDs - 32.5 mm
FS - 27.5%
RA - 29.3 mm
LVOT - 0.90 m/s
RVOT - 0.75 m/s

PATIENT

Talisker Nimmo

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

SPECIES

Canine

This examination demonstrates regurgitation of blood across Talisker's mitral valve resulting from degenerative valve disease. The hemodynamic effects of the regurgitation appear to be mild, as Talisker does not have secondary dilation of either of her left heart chambers. As such, Talisker's mitral valve disease appears to be well-compensated, and her current risk for the development of left-sided congestive heart failure appears to be low.

BREED

Boxer

Talisker's mitral valve disease is likely too mild to be the cause of her ventricular arrhythmia. While a non-cardiac cause cannot be ruled out, Talisker's breed suggests that her arrhythmia is likely secondary to the presence of the form of arrhythmogenic right ventricular cardiomyopathy (ARVC) characterized by ventricular arrhythmias in the absence of myocardial dysfunction.

SEX

FS

No therapy is recommended at this stage of Talisker's mitral valve disease. Avoidance of high intensity exercise is recommended due to the presence of a ventricular arrhythmia.

AGE

9 y

A recheck echocardiogram and ECG are recommended in 6 months, sooner if new clinical signs compatible with cardiac dysfunction develop.

WEIGHT

73.8 lb

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

Dr. Servantez





DATE

5/10/22

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. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

PERFORMED BY:

Tom McNeill

Keith Blass, DVM, MS, DACVIM (Cardiology)

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