



**PRESENTING CLINICAL SIGNS**

**DATE** History: Grade IVVI murmur. History of degenerative valve disease. Receiving furosemide 12.5 mg, pimobendan 2.5 mg, and enalapril 2.5 mg.

5/11/23

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**

Kelly Vazquez

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

There is mild left atrial dilation. The mitral valve leaflets are mildly thickened and exhibit systolic prolapse. There is Doppler evidence of mitral regurgitation present. There is mild left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are very mildly thickened, and a very mild jet of tricuspid regurgitation is present. The pulmonary artery and pulmonic valve are normal. No pericardial effusion or cardiac masses are seen.

LA - 24.1 mm  
LVIDd - 24.1 mm  
LVIDs - 12.0 mm  
FS - 50%  
RA - 12.7 mm  
LVOT - 1.62 m/s  
RVOT - 1.02 m/s

**PATIENT**

George Santos

**ASSESSMENT/RECOMMENDATIONS**

**SPECIES**

Canine

Degenerative mitral and tricuspid valve disease  
Pulmonary hypertension

**BREED**

Maltese

This examination demonstrates regurgitation of blood across George's mitral and tricuspid valves resulting from degenerative valve disease. George's tricuspid valve disease is mild, as evidenced by his absence of secondary right heart chamber dilation. His mitral valve disease is a bit more advanced, as George has mild secondary dilation of both his left atrium and left ventricle. As only mild left heart chamber dilation is present, George's current risk for the development of clinical signs secondary to his mitral valve disease such as coughing, exercise intolerance, syncope, and labored breathing, appears to be relatively low, though careful monitoring for these signs is recommended.

**SEX**

MN

Continued use of pimobendan (1.25 mg BID) is warranted based on this exam. Continued use of furosemide (at the lowest effective dose) and enalapril (2.5 mg am, 1.25 mg pm) would be warranted if George has experienced clinical signs that have improved with therapy.

**AGE**

10 y

A recheck echocardiogram is recommended in 6 months. Thoracic radiographs are recommended if George experiences respiratory clinical signs.

**WEIGHT**

8 lb

**HOSPITAL NAME**

Animal Paradise  
Hospital

**REFERRING VET**

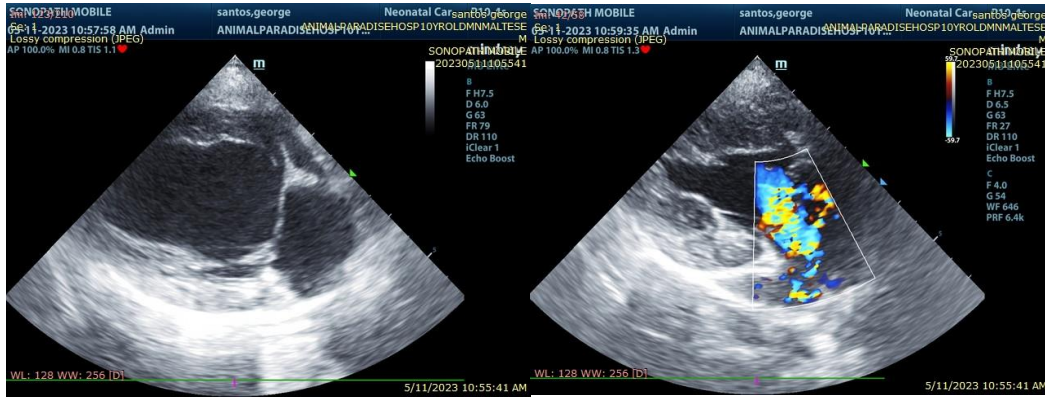
Dr. Hellworth



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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

George Santos

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.

SPECIES

Keith Blass, DVM, MS, DACVIM (Cardiology)  
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631-804-5754

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