



PATIENT

Fang Green

SPECIES

Canine

BREED

Cavalier

SEX

Male Neutered

AGE

11 years

WEIGHT

25.4lbs

PRESENTING CLINICAL SIGNS

History: History of progressive heart murmur, now grade III/VI systolic. No clinical signs. BP: 160-170 mmHg. *Sedated with Dexdomitor/torb.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is minimally increased with adequate function. LV wall thicknesses are normal.

Left atrium: The left atrium is moderately dilated.

Mitral valve: The mitral valve is diffusely thickened with mild prolapse into the left atrial lumen. Moderate to severe eccentric mitral regurgitation with a normal velocity.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears mildly thickened with mild to moderate tricuspid regurgitation. Normal velocity.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. Trace pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 50bpm.

INTERPRETED BY

Maggie Machen
 Lamy, DVM
 DACVIM (Cardiology)

IMAGING

PERFORMED BY

Pamela Harrigan,
 RDMS

2-Dimensional Measurements

Ao diam (cm)	1.8
LA diam (cm)	3.0
LA:Ao (Swe)	1.67
IVS thickness (cm)	0.8
LVID diastole (cm)	3.1
PW thickness (cm)	0.8
LVID systole (cm)	1.9
FS (%)	38

Doppler Measurements

PV Vmax (m/s)	0.62
AoV Vmax (m/s)	1.0
MR Vmax (m/s)	5.0
TR Vmax (m/s)	2.2
TR PG (mmHg)	22

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease causing moderate to severe mitral and mild moderate tricuspid regurgitation. Moderate left atrial enlargement indicates there is relatively low risk for imminent complication, however risk for progression to spontaneous congestive heart failure in the future is elevated. No additional issues are identified. Dexdomitor can affect results and should be avoided for future evaluations.

HOSPITAL NAME

Littleton Animal
 Hospital

REFERRING VET

Dr. Brooks

Given LA dilation, Pimobendan is recommended as below. Assessment of progression in the future will help predict long term outcome, however prognosis is guarded at this stage (B2).

INVOICE

24305

DATE

5/19/22

RECOMMENDATIONS

- Institute heart muscle support Pimobendan 0.3mg/kg PO q12h.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.



PATIENT

Fang Green

SPECIES

Canine

BREED

Cavalier

- Once on Pimobendan for 3-5 days, anesthetic risk is considered mild if needed. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

PLAN

SEX

Male Neutered

- Recommend conservative monitoring with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

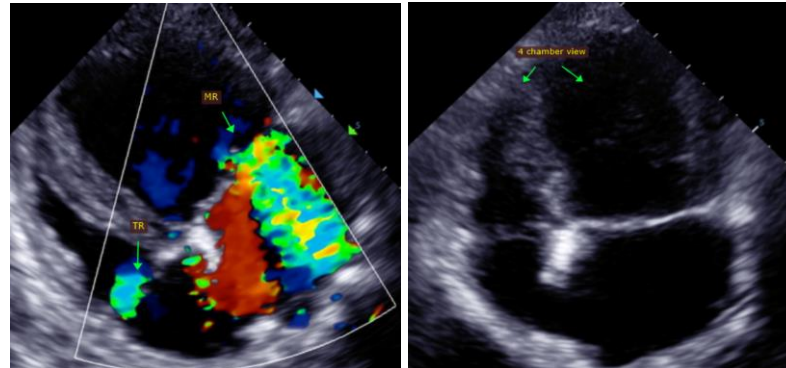
AGE

11 years

WEIGHT

25.4lbs

IMAGES



INTERPRETED BY

Maggie Machen
 Lamy, DVM
 DACVIM (Cardiology)

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.

IMAGING PERFORMED BY

Pamela Harrigan,
 RDCS

Thank you for this referral. This report was generated using transcription software, and minor dictation errors may be present. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

HOSPITAL NAME

Littleton Animal
 Hospital

Maggie Machen Lamy, DVM
 Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
 info@sonopath.com

REFERRING VET

Dr. Brooks

INVOICE

24305

DATE

5/19/22