

PATIENT

Polito Ramirez

PRESENTING CLINICAL SIGNS

History: Grade II-III/VI heart murmur; no clinical signs.

SPECIES

Canine

ECHOCARDIOGRAM FINDINGS

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

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

BREED

Dachshund

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is mildly thickened with no prolapse into the left atrial lumen. Mild eccentric mitral regurgitation with a normal velocity.

SEX

Male Intact

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

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

AGE

8 years

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears normal with trivial tricuspid regurgitation.

Pulmonic valve/pulmonary artery: The pulmonic valve is normal in morphology and mobility. No 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 120bpm.

WEIGHT

15.1lbs

2-Dimensional Measurements

Ao diam (cm)	1.8
LA diam (cm)	2.0
LA:Ao (Swe)	1.0
IVS thickness (cm)	0.73
LVID diastole (cm)	2.0
PW thickness (cm)	0.74
LVID systole (cm)	1.0
FS (%)	48

Doppler Measurements

PV Vmax (m/s)	0.87
AoV Vmax (m/s)	1.1
MR Vmax (m/s)	5.0
TR Vmax (m/s)	NM
TR PG (mmHg)	NA

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

INTERPRETATION OF THE FINDINGS

The cause of the murmur is chronic degenerative valve disease causing mild mitral and trivial tricuspid regurgitation. Lack of significant left atrial enlargement indicates the current risk for complication is low. A prominent aortic root is noted, and a baseline blood pressure is recommended. No concurrent issues such as systolic dysfunction or pulmonary hypertension are noted in this study. Assessment of progression in the future will help predict long term prognosis, which is highly variable at this stage (B1).

IMAGING PERFORMED BY

Pamela Harrigan,
RDMS

HOSPITAL NAME

East Boston Animal
Hospital

RECOMMENDATIONS

- In an asymptomatic dog without significant left atrial enlargement, no cardiac medications are clearly indicated.
- Baseline BP recommended.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- 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

REFERRING VET

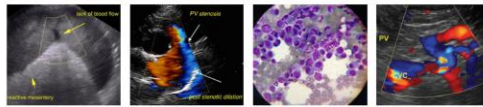
Dr. Chopra

INVOICE

24325

DATE

5/22/22



PATIENT

Polito Ramirez

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.

SPECIES

Canine

- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

BREED

Dachshund

PLAN

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

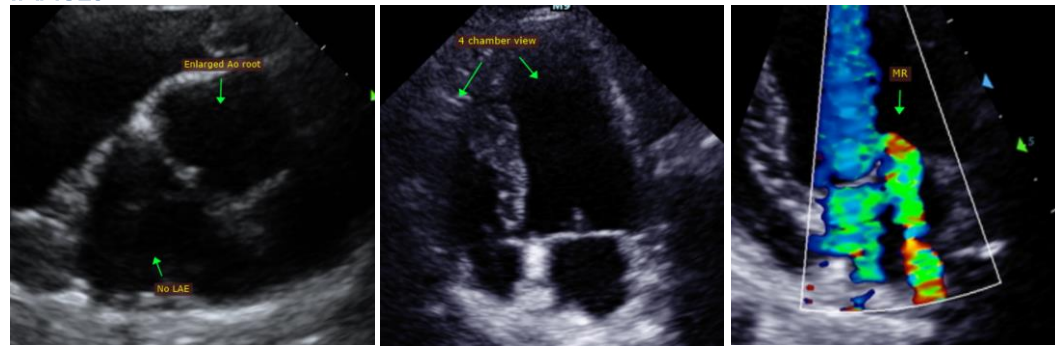
SEX

Male Intact

IMAGES

AGE

8 years



WEIGHT

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 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.

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 Hospital

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