


PRESENTING CLINICAL SIGNS

DATE History: New murmur. Asymptomatic. Pre-anesthetic evaluation.

ECHOCARDIOGRAPHIC FINDINGS

5/23/22 2D, M-mode, and Doppler study.

PERFORMED BY: Left atrial size is normal. The mitral valve leaflets are mildly thickened and exhibit mild systolic prolapse. 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 appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA - 27.4 mm
LVIDd - 27.2 mm
LVIDs - 17.2 mm
FS - 36.7%

PATIENT

Louie Ramos

RA - 22.2 mm
LVOT - 1.42 m/s
RVOT - 1.05 m/s

ASSESSMENT/RECOMMENDATIONS

SPECIES Degenerative mitral valve disease

Canine

This examination demonstrates regurgitation of blood across Louie's mitral valve resulting from degenerative valve disease. The hemodynamic effects of the regurgitation appear to be mild, as Louie does not have secondary dilation of either of his left heart chambers, and his left ventricular systolic function is normal. As such, Louie's mitral valve disease appears to be well-compensated, and his current risk for the development of clinical signs secondary to it, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be low.

BREED

Yorkie Mix

SEX

Louie's cardiovascular risk for general anesthesia is only mildly increased based on this exam, though I still recommend avoiding the use of alpha-2 agonists in the anesthetic protocol and reducing the IV fluid rate by 25% as precautions. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

MN

AGE

No therapy is recommended at this stage of disease.

14 y

A recheck echocardiogram is recommended in ~6 months to monitor for disease progression.

WEIGHT

23 lb

HOSPITAL NAME

Swart Veterinary
Imaging

REFERRING VET

Dr. Swart



DATE

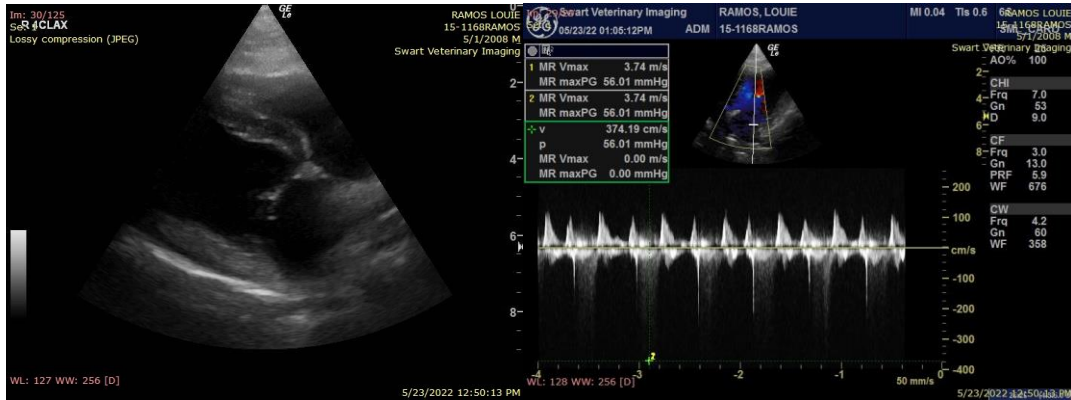
5/23/22

PERFORMED BY:

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
MS, 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.

PATIENT

Louie Ramos

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

Canine

Keith Blass, DVM, MS, DACVIM (Cardiology)
KeithBlass@gmail.com
631-804-5754

BREED

Yorkie Mix

SEX

MN

AGE

14 y

WEIGHT

23 lb

HOSPITAL NAME

Swart Veterinary
Imaging

REFERRING VET

Dr. Swart