

**PATIENT**

Greta Barens Vera

**SPECIES**

Canine

**BREED**

Poodle

**SEX**

Female Spayed

**AGE**

13 years

**WEIGHT**

8.2lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

G. Ferrer, DVM

**HOSPITAL NAME**

Paseos Veterinary  
Center

**REFERRING VET**

Dr. Biello

**INVOICE**

30689

**DATE**

5/9/23

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Chronic exertional syncope. Chronic murmur. BP: 151, 141, 141mmHg.  
-Current medications: Furosemide 12.5: 1/2-tab BID, Pimobendan 2.5mg: 1/2-tab BID and Spironolactone 25 mg: 1/4-tab BID.  
-Pertinent previous echo findings (7/2022 MML): Severe MR, severe LAE, mild LVE. LA: 2.3, LV: 3.2.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. Diffuse nodular thickening of mitral valve leaflets with prolapse into the left atrial lumen. Severe eccentric mitral regurgitation with severe left atrial enlargement. Normal MR velocity. Mild LV dilation with hyperdynamic myocardial function and evidence of volume overload. The tricuspid valve appears normal with no tricuspid regurgitation. No right heart dilation. The pulmonic and aortic valves appear normal in appearance and mobility. Normal pulmonic and aortic outflow velocities. Trace aortic and no pulmonic insufficiency noted. No effusions or tumors.

**CARDIAC CHART**

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	4.5	NA	NM	2.2	60	91	0.23
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	120	0.8	1.1	3.7	2.3	2.6	1.0
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
<b>BODY WEIGHT DEPENDENT PARAMETERS</b>				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>				10	1.50 (3.8)	3.27 (3.5)	2.06 (3.1)
				15	1.83 (2.0)	3.71 (2.4)	2.43 (2.1)
				20	2.02 (1.9)	4.14 (2.2)	2.80 (2.0)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)
				40	2.62 (5.2)	5.48 (6.1)	3.96 (5.4)
				50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Chronic degenerative valve disease persists with overall stability. Severe MR is similar to previous without progressive left or right heart enlargement. Trace AI has developed; however, reported blood pressures are normal. No additional issues are identified.

Persistent syncope despite medications is of unknown origin. Continued cardiac support is recommended with addition of an ACE-I. If the episodes worsen in frequency or duration, further evaluation such as a holter monitor may be warranted.



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Once in CHF, long term prognosis is guarded to poor, however most dogs are able to maintain a good QOL on medications for an average of 8-12 months. Should syncope persist despite medications (particularly with exertion), revisiting the situational component of the episodes, systemic possibilities, etc. is recommended.

**SPECIES**

Canine

Monitoring of sleeping respiratory rates will be paramount to screen for congestive heart failure at home. Omega fatty acid supplementation and mild salt restriction may also be of some long-term benefit. Monitor for development of a cough, labored breathing, exercise intolerance or worsening collapse episodes in the future.

**BREED**

Poodle

**SEX**

Female Spayed

**PLAN**

Continue Lasix, Pimobendan, and Spironolactone as prescribed. Institute ACE-I 0.5mg/kg PO q12h. Consider Hydrocodone as is discussed.

Monitor renal values and BP every 3-4 months while on diuretics.

**AGE**

13 years

Recommend conservative monitoring with a recheck echocardiogram in 6 months, sooner if any clinical signs develop in the interim.

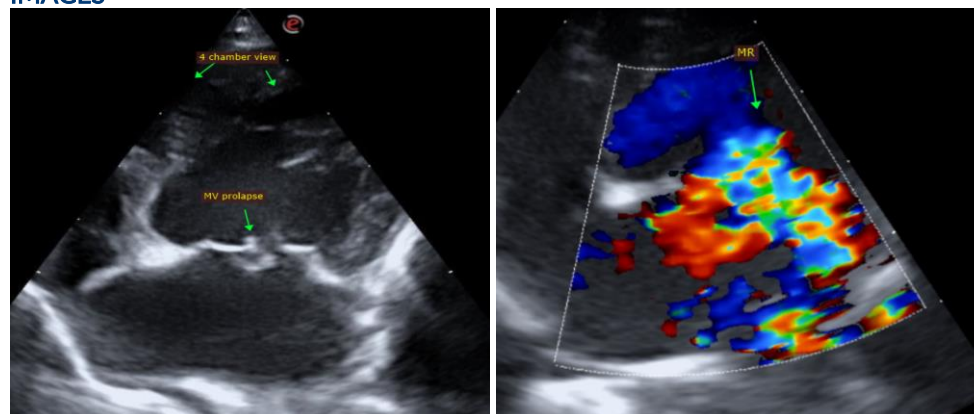
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**IMAGES**

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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.

**REFERRING VET**

Dr. Biello

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.

**INVOICE**

30689

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**DATE**

5/9/23