



PRESENTING CLINICAL SIGNS

History: Grade 2/6 murmur. Coughing. Pre-anesthetic evaluation (spay, dental).

DATE

6/14/23

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Shari Reffi, CVT

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve leaflets are mildly thickened and exhibit mild systolic prolapse. A mild to moderate jet of eccentric mitral regurgitation is present. Left ventricular dimensions are normal. 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 mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

LA - 28.6 mm
LVIDd - 27.0 mm
LVIDs - 13.7 mm
FS - 49%
RA - 19.5 mm
LVOT - 1.62 m/s
RVOT - 0.88 m/s
TR - 2.74 m/s

PATIENT

Annabelle Portner

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

BREED

CKCS

This examination demonstrates regurgitation of blood across Annabelle's mitral and tricuspid valves resulting from degenerative valve disease. The hemodynamic effects of each of the regurgitations appear to be mild, as Annabelle does not have secondary dilation of any of her cardiac chambers. As such, Annabelle's valvular diseases appear to be well-compensated, and her cough does not appear to be cardiogenic in origin.

SEX

F

Annabelle's cardiovascular risk for general anesthesia is mildly increased based on this exam, therefore, some precautions should be taken in order to minimize this risk. I recommend avoiding the use of alpha-2 agonists in the anesthetic protocol, as well as reducing the IV fluid rate by 25%. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

AGE

6 y

No therapy is recommended at this stage of Annabelle's valvular diseases.

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

WEIGHT

20 lb

HOSPITAL NAME

Millburn VH

REFERRING VET

Dr. Mosquera

