


**PRESENTING CLINICAL SIGNS**

**DATE** History: Grade 4/6 left apical systolic murmur. Previously diagnosed with degenerative valve disease. Increased coughing recently. Was receiving furosemide 20 mg am, 10 mg pm, pimobendan 5 mg BID, enalapril 7.5 mg BID, and spironolactone 25 mg am, 12.5 mg pm, however, furosemide dose increased to 20 mg BID two weeks ago.

6/14/23

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**  
 Karen Ebersole, DVM,  
 DABVP

There is severe left atrial dilation. The mitral valve leaflets are mildly thickened and exhibit systolic prolapse. A severe jet of eccentric mitral regurgitation is present. There is moderate to severe left ventricular dilation. 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 very mildly thickened, and a very mild jet of tricuspid regurgitation is present. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

**INTERPRETED BY**

Keith Blass, DVM,  
 MS, DACVIM  
 (Cardiology)

**PATIENT**

Lily Millett

LA - 50.8 mm  
 LVIDd - 44.5 mm  
 LVIDs - 22.0 mm  
 FS - 50.6%  
 RA - 22.4 mm  
 LVOT - 1.36 m/s  
 RVOT - 0.88 m/s

**SPECIES**

Canine

**ASSESSMENT/RECOMMENDATIONS**

Degenerative mitral and tricuspid valve disease

**BREED**

This examination demonstrates slight progression of Lily's mitral valve disease over the past 8 months, as both her left atrial and left ventricular diameters have increased slightly. As Lily has severe, mildly progressive left atrial dilation, it's very likely that mainstem bronchial compression is contributing to her cough. In addition to coughing, Lily is at high risk for the development of exercise intolerance, syncope, and labored breathing, therefore, careful monitoring for these signs is recommended.

**CKCS**
**SEX**

FS

New to today's exam is very mild regurgitation of blood across Lily's tricuspid valve resulting from degenerative valve disease.

**AGE**

7 y

No change in Lily's current cardiac medication is recommended at this time. Should Lily's cough persist despite the recent increase in her furosemide dose, the addition of hydrocodone (3.75 mg PRN, up to every 6 hours) may be warranted.

A recheck echocardiogram is recommended in 6-9 months. Thoracic radiographs are recommended if Lily experiences labored breathing.

**WEIGHT**

29 lb

**HOSPITAL NAME**

Scanvet

**REFERRING VET**

Dr. Gagnon



DATE

6/14/23

PERFORMED BY:

Karen Ebersole, DVM,  
DABVP

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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

Lily Millett

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

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631-804-5754

BREED

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