



PRESENTING CLINICAL SIGNS

DATE History: Pre-operative ECG showed a supraventricular arrhythmia and left-axis deviation.

6/15/23 **ECHOCARDIOGRAPHIC FINDINGS**
2D, M-mode, and Doppler study.

PERFORMED BY: Left atrial size is normal. The mitral valve is normal. There is mild symmetrical left ventricular hypertrophy. 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 valve is normal. The pulmonary artery and pulmonic valve 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 - 26.2 mm
LVIDd - 26.6 mm
LVIDs - 19.2 mm
FS - 27.8%
RA - 16.5 mm
LVOT - 0.64 m/s
RVOT - 0.85 m/s

PATIENT

Bella Hunt

ASSESSMENT/RECOMMENDATIONS
Normal echocardiogram

SPECIES

Canine

This examination demonstrates no evidence of structural heart disease. As such, no reason for Bella's supraventricular arrhythmia is appreciated in the image set, and her left axis deviation is likely a normal variant.

BREED

No therapy is recommended based on this exam.

CKCS

Given the presence of a supraventricular arrhythmia, I recommend avoiding the use of alpha-2 agonists, ketamine, telazol, and, if possible, anticholinergics in the anesthetic protocol. Careful monitoring of Bella's heart rhythm is recommended during the procedure.

SEX

FS

A recheck echocardiogram is recommended if new physical exam and/or clinical abnormalities suggestive of the presence of structural heart disease develop.

AGE

4 y

WEIGHT

10 kg

HOSPITAL NAME

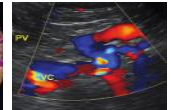
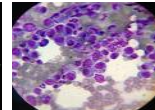
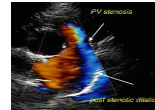
Swart Veterinary
Imaging



REFERRING VET

Dr. Swart

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.

DATE

6/15/23

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.

PERFORMED BY:

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