



PRESENTING CLINICAL SIGNS

History: Presented for turning blue and becoming limp during exercise, increased expiratory effort. Grade 4/6 murmur. Peritoneal effusion. History of tracheal collapse.

DATE

6/2/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Kelly Vazquez

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

The left atrium is mildly underfilled. The mitral valve appears normal, though trace mitral regurgitation is present. The left ventricle is underfilled. Left ventricular systolic function is normal. The aorta and aortic valve are normal. There is mild right atrial and right ventricular dilation. The tricuspid valve leaflets are mildly thickened, and a moderate jet of tricuspid regurgitation is present. TR velocity is consistent with the presence of moderate pulmonary hypertension. The pulmonary artery and pulmonary are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Diesel Defeis

LA - 18.1 mm
LVIDd - 16.0 mm
LVIDs - 9.2 mm
FS - 42.5%
RA - 23.0 mm
RVIDd - 22.5 mm
LVOT - 1.30 m/s
RVOT - 0.66 m/s
TR - 4.00 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative tricuspid valve disease
Pulmonary hypertension

BREED

Pomeranian

This examination demonstrates moderate regurgitation of blood across Diesel's tricuspid valve resulting from degenerative valve disease, the velocity of which is consistent with the presence of moderate pulmonary hypertension. Secondary to the two diseases, Diesel has mild dilation of both his right atrium and right ventricle, and it's likely that his peritoneal effusion is the result of the development of right-sided congestive heart failure. It's also likely that Diesel's pulmonary hypertension is the cause of his cyanosis/pre-syncope during exercise.

SEX

MN

Recommended therapy at this time includes furosemide 12.5 mg BID, enalapril (2.5 mg BID), pimobendan (1.875 mg am, 1.25 mg pm), and sildenafil (10 mg BID-TID).

AGE

15 y

A recheck physical exam and renal/electrolyte profile are recommended in 1-2 weeks. A recheck echocardiogram is recommended in 4 months, sooner if Diesel experiences worsening exercise capacity, syncope, or reaccumulation of peritoneal effusion.

WEIGHT

13.6 lb

HOSPITAL NAME

Ho-Ho-Kus VH

REFERRING VET

Dr. Scott



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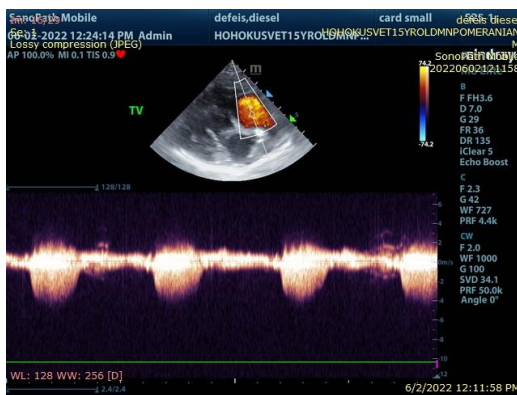
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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