



PATIENT

Ellie Stockley

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spayed

AGE

7 years

WEIGHT

7lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Norfolk County
Veterinary Services

REFERRING VET

Dr. McCabe

INVOICE

31487

DATE

6/22/23

PRESENTING CLINICAL SIGNS

History: Recheck echo. History chronic valvular disease. Stage B2. History systemic hypertension. Doing well with no clinical concerns. BP: 150-160mmHg.

-Pertinent previous echo findings (12/8/22 MML): LA 1.9 cm, LA:Ao 1.8, LV 2.6 cm, moderate LAE, LVE, moderate MR, mild TR (3,4 m/s; 46 mmHg), moderate pulmonary hypertension. On Pimobendan 1.25 mg BID, Enalapril 1.25 mg BID.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is increased with hyperdynamic function. LV wall thicknesses are normal.

Left atrium: The left atrium is moderately dilated.

Mitral valve: The mitral valve is diffusely thickened with prolapse into the left atrial lumen. Moderate eccentric mitral regurgitation with a normal velocity.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.

Right ventricle: Mild RV enlargement.

Right atrium: Mild RA enlargement.

Tricuspid valve: The tricuspid valve appears mildly thickened with mild tricuspid regurgitation. Velocity consistent with mild to moderate pulmonary hypertension.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 140bpm.

2-Dimensional Measurements

Ao diam (cm)	1.1
LA diam (cm)	1.9
LA:Ao (Swe)	1.8
IVS thickness (cm)	0.5
LVID diastole (cm)	2.6
PW thickness (cm)	0.5
LVID systole (cm)	0.7
FS (%)	73

Doppler Measurements

PV Vmax (m/s)	1.1
AoV Vmax (m/s)	1.7
MR Vmax (m/s)	4.9
TR Vmax (m/s)	3.3
TR PG (mmHg)	43

INTERPRETATION OF THE FINDINGS

Compared to the prior study, findings are similar. Moderate mitral and mild tricuspid regurgitation are unchanged with stable left and right heart dimensions. Pulmonary hypertension is similar to previous without significant pressure elevation. No additional issues have developed.

Given these findings, continue dual therapy as previously recommended. Continued assessment of progression in the future will help predict long term outcome; however, prognosis is guarded at this stage (B2).



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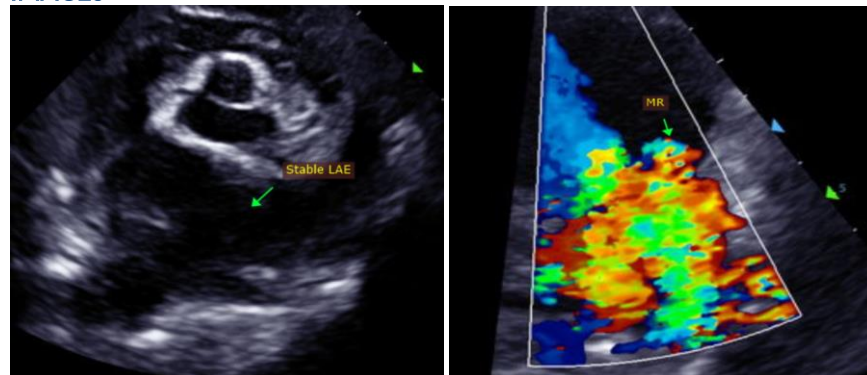
RECOMMENDATIONS

- Continue Pimobendan 0.3mg/kg PO q12h.
- Continue ACE-I 0.5mg/kg PO q12h.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- Once on Pimobendan for 3-5 days, anesthetic risk is considered mild if needed. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

IMAGES



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. 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.

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Echocardiogram performed by: Pamela Harrigan, RDCS
 Pet Animal Ultrasound Service (4paus.com)