



PATIENT

Leo Lienesch

SPECIES

Canine

BREED

Jack Russell Terrier

SEX

Male

AGE

10 years

WEIGHT

14lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

E. Petrone, DVM

HOSPITAL NAME

Long Branch Animal
Hospital

REFERRING VET

Dr. Petrone

INVOICE

31619

DATE

6/29/23

PRESENTING CLINICAL SIGNS

History: Recheck echo.
-Pertinent previous echo findings (3/2023 MML): Severe MR, severe LAE, mild LVE, no RHE, mild TR. LA; 2.6, LV: 4.2.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The mitral valve is diffusely thickened with prolapse into the left atrial lumen. There is severe eccentric mitral regurgitation present. The MR velocity is normal. There is severe left atrial enlargement. There is mild left ventricular dilation. Left ventricular systolic function is hyperdynamic. No right atrial and ventricular dilation (subjective). Mild thickening of the tricuspid valve with mild TR. There is normal systolic flow velocity across the aortic valve. The aortic valve appears trileaflet with normal mobility. The main pulmonary artery is normal in diameter. The pulmonic valve is normal in appearance. No pericardial/pleural effusion or cardiac masses are seen.

CARDIAC CHART

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	5.6	NM	NM	2.6	48	90	NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	NM	1.3	1.0	6.4	2.6	3.9	2.0
*Normal chamber parameters expressed as a mean value (SD)							
BODY WEIGHT DEPENDENT PARAMETERS							
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>							
Adapted from June Boon, Veterinary Echocardiography, 1998							
Rishniw M and Hollis NE, J Vet Intern Med 2000; 14:429-435							
Hansson et al, Vet Rad and Ultrasound 2002							
Bonagura et al. Echocardiography: principles of interpretation, Vet Clin North Am 15:1177, 1995							
				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
				10	1.50 (3.8)	3.27 (3.5)	2.06 (3.1)
				15	1.83 (2.0)	3.71 (2.4)	2.43 (2.1)
				20	2.02 (1.9)	4.14 (2.2)	2.80 (2.0)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)
				40	2.62 (5.2)	5.48 (6.1)	3.96 (5.4)
				50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Compared to the prior study, findings are similar. The LA and LV dimensions are significantly increased, yet no obvious progression is seen. No significant right heart enlargement or ancillary issues have developed.

Given these findings, continue cardiac supportive medications as was previously described. Continued assessment of progression in the future will help predict long term outcome, however prognosis is guarded at this stage (late B2/C). Unfortunately, the patient will always be at risk for recurrent CHF, development of arrhythmias/LA tear, syncope and/or sudden death in the future.



PATIENT

Leo Lienesch

Close monitoring for development of associated clinical signs (development of a cough, labored breathing, exercise intolerance or worsening collapse episodes) is recommended. Monitoring of sleeping breathing rates is recommended as the best way to screen for CHF at home.

SPECIES

Canine

Elective anesthesia is not advised, as there is high risk for complication.

BREED

Jack Russell Terrier

Omega fatty acid supplementation and mild salt restriction may also be of some long-term benefit.

SEX

Male

PLAN

Continue Pimobendan 0.3mg/kg PO q12h. Continue ACE-I (benazepril or enalapril) 0.5mg/kg PO q12h. Continue spironolactone 1-2mg/kg PO q12h. Utilize Lasix if CHF is or was diagnosed.

AGE

10 years

Monitor renal values every 3-4 months lifelong to ensure tolerance of medications.

WEIGHT

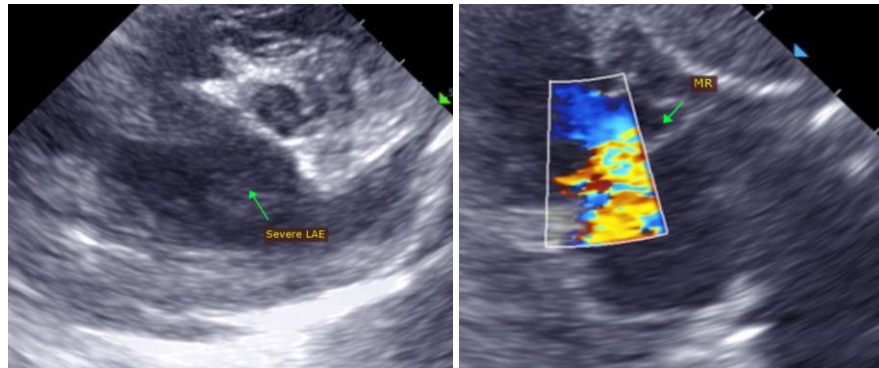
14lbs

A recheck echocardiogram is recommended in 6 months to screen for progression, sooner if clinical signs arise.

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGES



IMAGING PERFORMED BY

E. Petrone, DVM

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.

HOSPITAL NAME

Long Branch Animal Hospital

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.

REFERRING VET

Dr. Petrone

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

INVOICE

31619

DATE

6/29/23