


PRESENTING CLINICAL SIGNS

DATE History: Pre-anesthetic evaluation. Previously had a poor anesthetic experience (possible bradycardia) at previous rDVM. Sedated for exam with butorphanol.

7/19/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve leaflets are very mildly thickened, a very mild jet of eccentric mitral regurgitation is present. 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.

LA - 32.1 mm
LVIDd - 29.3 mm
LVIDs - 20.7 mm
FS - 29%

PATIENT

Tanner Knoll

RA - 19.7 mm
LVOT - 1.07 m/s
RVOT - 1.23 m/s

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

SPECIES

Canine

This examination demonstrates very mild regurgitation of blood across Tanner's mitral valve resulting from degenerative valve disease. The hemodynamic effects of the regurgitation also appear to be mild, as Tanner does not have secondary dilation of either of his left heart chambers, and his left ventricular systolic function is normal. As such, Tanner's mitral valve disease appears to be well-compensated, and his current risk for the development of clinical signs secondary to it, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be low.

BREED

Cocker Spaniel Mix

Tanner's cardiovascular risk for general anesthesia is low based on this exam, and there are no specific contraindications to the use of any anesthetic agents. Having said that, if Tanner previously experienced bradycardia while anesthetized, premedication with atropine or glycopyrrolate, as well as avoidance of alpha-2 agonists, would be warranted as a precaution.

SEX

MN

No therapy is recommended based on this exam.

AGE

A recheck echocardiogram is recommended in 9 months.

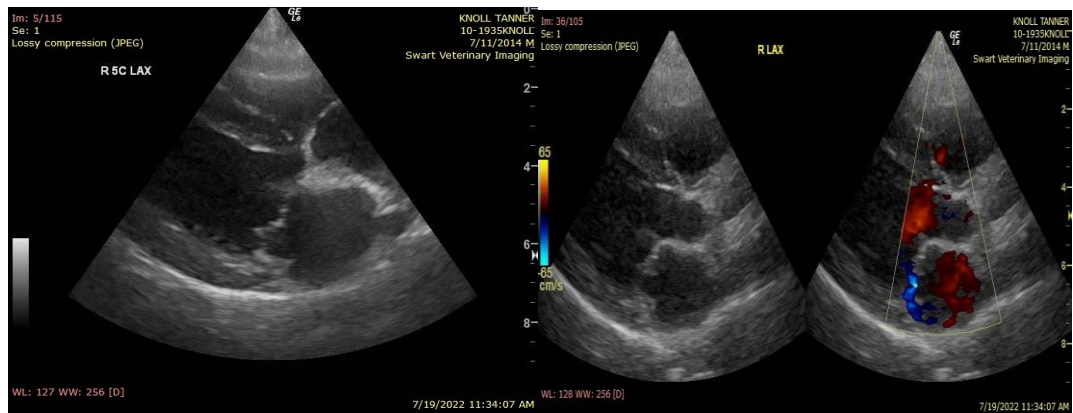
8 y

WEIGHT

26 lb

HOSPITAL NAME

Swart Veterinary
Imaging


REFERRING VET

Dr. Swart



DATE

7/19/22

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.

PERFORMED BY:

Dr. Meredith Swart

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.

INTERPRETED BY

Keith Blass, DVM, MS, DACVIM (Cardiology)
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631-804-5754

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MS, DACVIM
(Cardiology)

PATIENT

Tanner Knoll

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