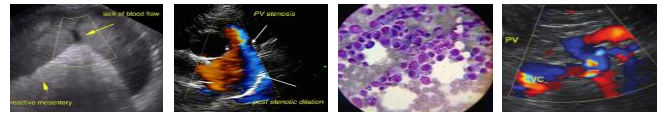


	PRESENTING CLINICAL SIGNS
DATE	History: Grade 5/6 murmur. History of CHF.
7/25/22	ECHOCARDIOGRAPHIC FINDINGS
	2D, M-mode, and Doppler study.
PERFORMED BY:	There is moderate to severe left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. A moderate to severe jet of eccentric mitral regurgitation is present. There is moderate left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity is consistent with the presence of mild pulmonary hypertension (PG 36 mmHg). The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.
Dave Stasiuk, RDMS, RDCS	
INTERPRETED BY	
Keith Blass, DVM, MS, DACVIM (Cardiology)	
PATIENT	LA - 32.7 mm LVIDd - 29.5 mm LVIDs - 13.5 mm FS - 54%
Kyran Shah	LVOT - 1.07 m/s RVOT - 0.77 m/s TR - 3.00 m/s
	RADIOGRAPHIC FINDINGS
SPECIES	Three-view thoracic radiographs are submitted for review.
Canine	There is moderate left atrial and left ventricular enlargement. The right atrium appears prominent in the VD image, however, this is an artifact created by the enlarged left heart. The pulmonary vessels are within normal limits. The pulmonary parenchyma and pleural space are within normal limits. The trachea is normal. The remainder of the thorax is unremarkable.
BREED	
Maltese Mix	ASSESSMENT/RECOMMENDATIONS
	Degenerative mitral and tricuspid valve disease Pulmonary hypertension
SEX	
FS	Kyran's echocardiogram demonstrates regurgitation of blood across her mitral and tricuspid valves resulting from degenerative valve disease. Her tricuspid valve disease is mild, and appears to be well-compensated at this time. Kyran's mitral valve disease is more advanced, as she has moderate to severe mitral regurgitation present, with moderate to severe secondary dilation of her left atrium and moderate dilation of her left ventricle, as well as mild secondary pulmonary hypertension. Kyran's radiographs show that her mitral valve disease is currently compensated, however, she is at relatively high risk for the development of clinical signs, such as coughing, exercise intolerance, syncope, and labored breathing, therefore, careful monitoring for these signs is recommended.
AGE	
13 y	
WEIGHT	
3.9 kg	Therapy with pimobendan (1.25 mg BID) is warranted based on Kyran's echocardiogram. If she has previously experienced an episode of left-sided congestive heart failure, additional therapy with furosemide (minimum 8 mg BID), enalapril (1.25 mg BID), and spironolactone (6.25 mg BID) would be warranted. No therapy is recommended for Kyran's pulmonary hypertension at this time.
HOSPITAL NAME	
Bowmont AH	A renal/electrolyte profile is recommended in 1-2 weeks if furosemide and/or enalapril is being started and/or a dose is increased. A recheck echocardiogram is recommended in 6 months. Repeat thoracic radiographs are recommended if Kyran experiences difficulty breathing.
REFERRING VET	
Dr. Asemadahun	



DATE

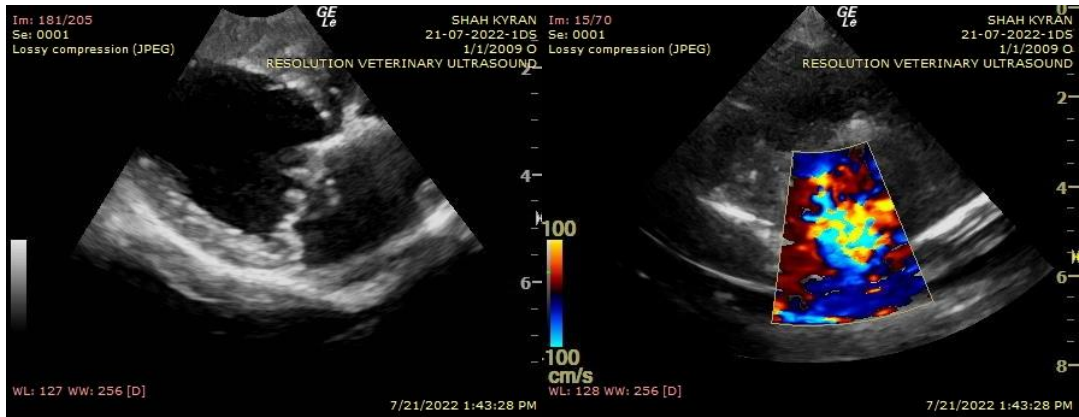
7/25/22

PERFORMED BY:

Dave Stasiuk, RDMS,
RDCS

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)



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.

PATIENT

Kyran Shah

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.

SPECIES

Canine

Keith Blass, DVM, MS, DACVIM (Cardiology)
KeithBlass@gmail.com
631-804-5754

BREED

Maltese Mix

SEX

FS

AGE

13 y

WEIGHT

3.9 kg

HOSPITAL NAME

Bowmont AH

REFERRING VET

Dr. Asemadahun