



**PATIENT**

Winston Placzek

**SPECIES**

Canine

**BREED**

Shih Tzu Mix

**SEX**

Male Neutered

**AGE**

10 years

**WEIGHT**

12.5lbs

**INTERPRETED BY**

Maggie Machen Lamy, DVM DACVIM (Cardiology)

**IMAGING PERFORMED BY**

Pamela Harrigan, RDCS

**HOSPITAL NAME**

Mass Veterinary Services

**REFERRING VET**

Dr. Masloski

**INVOICE**

31645

**DATE**

7/3/23

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. History chronic valvular disease - Stage B1. Presently, Winston is doing well at home with a great appetite and activity level and no clinical issues. On exam: NSR , grade III/VI murmur with PMI left apical area, PSS, lung fields clear, mm pink, moist, CRT<2. BP: 160 mmHg x 4. Currently, no medications. \*No sedation for study. -Pertinent previous echo findings (11/8/22 MML): LA 1.5 cm; LA:Ao 1.0, LV 2.0 cm; normal chamber sizes, mild MR, mild TR (2.8 m/s).

**ECHOCARDIOGRAM FINDINGS**

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

**Left ventricle:** The LV diameter is normal with adequate myocardial function. LV wall thicknesses are normal.

**Left atrium:** The left atrium is normal.

**Mitral valve:** The mitral valve is diffusely thickened with minimal prolapse into the left atrial lumen. Mild 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:** Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

**Right atrium:** Normal RA dimension.

**Tricuspid valve:** The tricuspid valve appears mildly thickened with mild tricuspid regurgitation. Normal velocity.

**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 130bpm.

**2-Dimensional Measurements**

Ao diam (cm)	1.4
LA diam (cm)	1.4
LA:Ao (Swe)	1.4
IVS thickness (cm)	0.7
LVID diastole (cm)	1.9
PW thickness (cm)	0.7
LVID systole (cm)	1.0
FS (%)	47

**Doppler Measurements**

PV Vmax (m/s)	0.6
AoV Vmax (m/s)	1.1
MR Vmax (m/s)	6.0
TR Vmax (m/s)	2.7
TR PG (mmHg)	29

**INTERPRETATION OF THE FINDINGS**

Compared to the prior study, findings remain stable. Mild mitral and tricuspid regurgitation are unchanged without right or left heart enlargement. The pulmonary pressures are normal, and no additional issues are identified.

Given these findings, no medications are indicated. Continued assessment of progression in the future will help predict long term prognosis, which is highly variable at this stage (B1).



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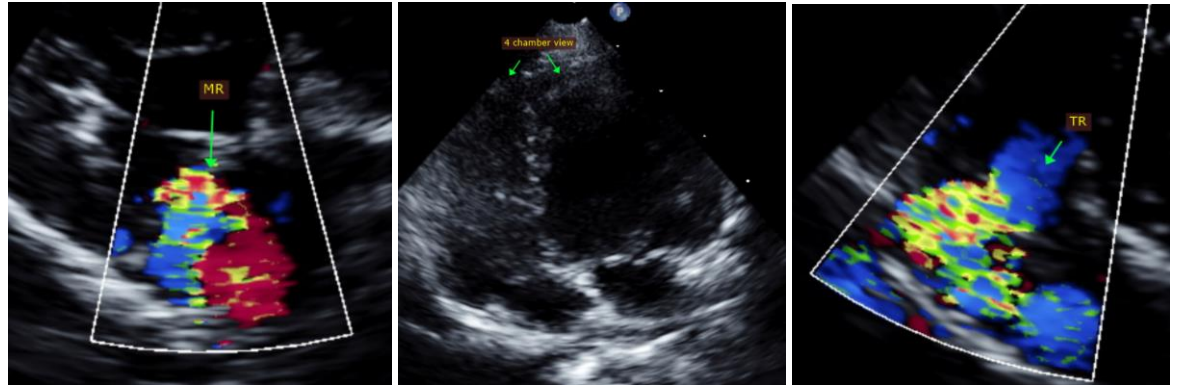
**RECOMMENDATIONS**

- No cardiac medications are clearly indicated.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- No cardiac contraindication for general anesthesia prior to chamber enlargement.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

**PLAN**

- Recommend conservative monitoring with a recheck echocardiogram annually, 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)