



**PATIENT**

Indigo Morrissey

**SPECIES**

Canine

**BREED**

Doberman

**SEX**

Female Spayed

**AGE**

12 years

**WEIGHT**

37.6kgs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

Nigel Gumley, DVM

**HOSPITAL NAME**

Cedarview Animal  
Hospital

**REFERRING VET**

Dr. Gumley

**INVOICE**

31670

**DATE**

7/5/23

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Recently developed increased VPCs over 24-hour holter but air quality was poor that day. Otherwise, no clinical symptoms of any problems. Had grade 2 malignant melanoma removed from caudal thigh 8 months ago, no recurrence. Chest mass noted in Jan in caudoventral chest measuring 1.8 cm diameter but unchanged in April. Periodic hepatopathy with increased liver enzymes. BP: 144-149mmHg.  
-Pertinent previous echo findings (2021 MML): Borderline LAE, no MR, trivial TR. LV: 4.5/3.4, FS: 25%.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. Normal mitral valve leaflets with no prolapse into the left atrial lumen. Trace central mitral regurgitation with normal left atrial dimension. Normal LV in systole with a mildly increased diastolic dimension. Mildly depressed myocardial function. The tricuspid valve appears normal with trivial tricuspid regurgitation. Normal right atrial and ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No obvious aortic or pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

**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	NM	NM	NM	1.1	21	43	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	95	1.2	0.7	37.6	3.1	4.4	3.47
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
<b>BODY WEIGHT DEPENDENT PARAMETERS</b>				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>				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, there is slight progression in LV dysfunction. The LV diastolic dimension is stable, and the LA remains normal. Continued monitoring is recommended; however, this in addition to increased VPCs is concerning for early DCM. A small mitral leak has developed; however, this is hemodynamically insignificant. No additional issues.



**PATIENT**

Indigo Morrissey

No cardiac medications are indicated at this time. Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes. I generally recommend fish oil supplementation in any Doberman, given the anti-arrhythmic properties of omega fatty acids.

**SPECIES**

Canine

Continue to recheck a holter and echocardiogram every 6 months. Sooner if clinical signs or a heart murmur arises.

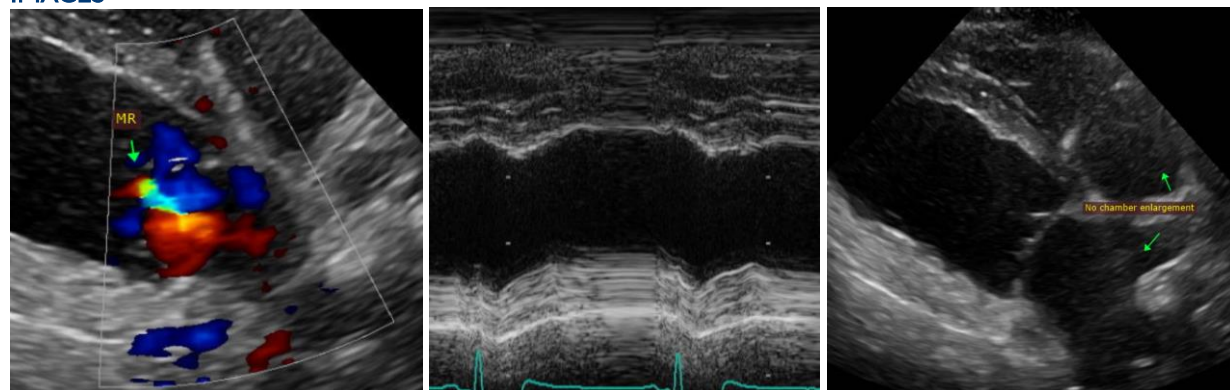
**BREED**

Doberman

**IMAGES**

**SEX**

Female Spayed



**AGE**

12 years

**WEIGHT**

37.6kgs

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.

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

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.

**IMAGING PERFORMED BY**

Nigel Gumley, DVM

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

**HOSPITAL NAME**

Cedarview Animal  
Hospital

**REFERRING VET**

Dr. Gumley

**INVOICE**

31670

**DATE**

7/5/23