



PATIENT

Fuzzie Whitman

SPECIES

Canine

BREED

Terrier Mix

SEX

Male Neutered

AGE

5 years

WEIGHT

30.5lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

S. Doverpike, DVM

HOSPITAL NAME

Franklin Animal Clinic
Inc

REFERRING VET

Dr. Doverspike

PRESENTING CLINICAL SIGNS

History: Recheck echo.

-Current medications: Amlodipine and Pimobendan.

-Pertinent previous echo findings (1/2023 MML): Moderate MR, moderate LAE, mild LVE, trace TR.

LA: 3.2, LV: 3.9.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Diffuse thickening of mitral valve leaflets (anterior>posterior) with minimal prolapse into the left atrial lumen. Moderate eccentric mitral regurgitation with mild left atrial dilation. Normal MR velocity. Mildly increased LV diameter with adequate myocardial function. The tricuspid valve appears subjectively normal, with mild tricuspid regurgitation. Normal velocity. Normal right atrial and ventricular diameter. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities. No aortic or pulmonic insufficiency. No pericardial or pleural effusion noted. No cardiac tumors observed.

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	5.8	2.0	NM	1.5	39	70	0.2
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	85	1.6	1.4	13.8	3.0	3.9	2.2
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
BODY WEIGHT DEPENDENT PARAMETERS				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

Chronic degenerative valve disease persists with continued stability. Moderate mitral and mild tricuspid regurgitation are unchanged, with stable left and right heart dimensions. The LA is actually improved comparatively. No concurrent issues have developed.

INVOICE

31704

DATE

7/6/23

Given these findings, continue Pimobendan as previously recommended. Lifelong blood pressure monitoring is recommend, particularly given Amlodipine. Continued assessment of progression is



PATIENT

Fuzzie Whitman

recommended, with a guarded prognosis (stage B2). Patient may be at risk for development of CHF, arrhythmias, and/or sudden death going forward.

SPECIES

Canine

Omega fatty acid supplementation and mild salt restriction may also be of some long-term benefit. Monitor for development of a progressive cough, labored breathing, exercise intolerance or collapse episodes.

BREED

Terrier Mix

Anesthetic risk remains mildly elevated. Cardiac protective drug choices (opioid/benzodiazepine premedication, Propofol or alfaxalone induction, iso or sevo gas) are recommended. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Judicious IV fluid rates are recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.

SEX

Male Neutered

PLAN

Continue Pimobendan 0.25-0.3mg/kg PO q12h. Continue Amlodipine to affect (target BP <160mmHg in hospital).

AGE

5 years

Recommend monitor for progression with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

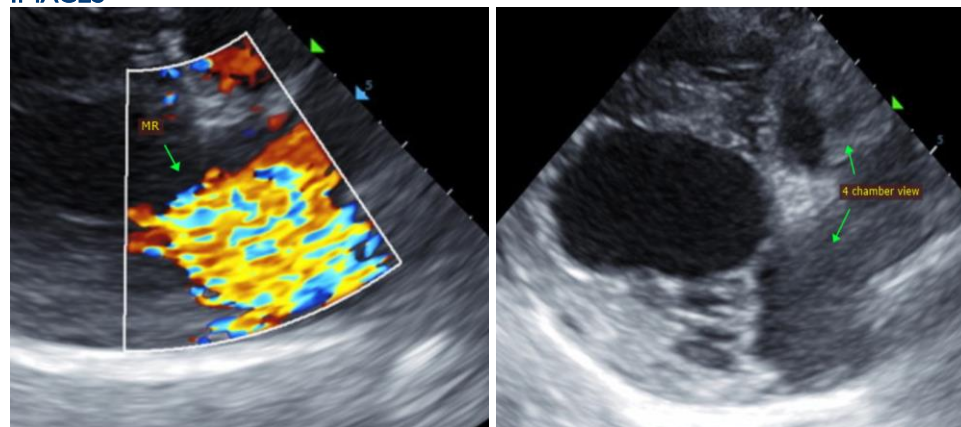
WEIGHT

30.5lbs

IMAGES

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)



IMAGING PERFORMED BY

S. Doverspike, DVM

HOSPITAL NAME

Franklin Animal Clinic
Inc

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.

REFERRING VET

Dr. Doverspike

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.

INVOICE

31704

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

DATE

7/6/23