


PRESENTING CLINICAL SIGNS

DATE History: Grade II/VI murmur. Pre-anesthetic evaluation (toe amputation).

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Sands Hill MVU

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve leaflets are mildly thickened, and there is Doppler evidence of mitral regurgitation present. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal, though trace aortic insufficiency is present. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and there is Doppler evidence of tricuspid regurgitation present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen. Pleural effusion is present.

ECG during echo: Sinus rhythm

PATIENT

Jackson Brown

LA - 32.1 mm
LVIDd - 28.7 mm
LVIDs - 13.7 mm
FS - 52%
RA - 20.3 mm
LVOT - 1.09 m/s
RVOT - 0.84 m/s
TR - 2.62 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

BREED

Mix

This examination demonstrates regurgitation of blood across Jackson's mitral and tricuspid valves resulting from degenerative valve disease. The hemodynamic effects of each of the regurgitations also appear to be mild, as Jackson does not have secondary dilation of any of his cardiac chambers. As such, Jackson's valvular diseases appear to be well-compensated, and his current risk for the development of clinical signs secondary to them, such as coughing, exercise intolerance, syncope, labored breathing, and abdominal distension, appears to be low.

SEX

MN

AGE

11 y

Jackson's cardiovascular risk for general anesthesia is only mildly increased based on this exam, though I still recommend avoiding the use of alpha-2 agonists in the anesthetic protocol and reducing the IV fluid rate by 25% as precautions. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

No therapy is recommended at this stage of Jackson's valvular diseases.

WEIGHT

27 lb

A recheck echocardiogram is recommended in 6 months to monitor for disease progression.

HOSPITAL NAME

Sands Hill MVU

REFERRING VET

Dr. Rubendall



DATE

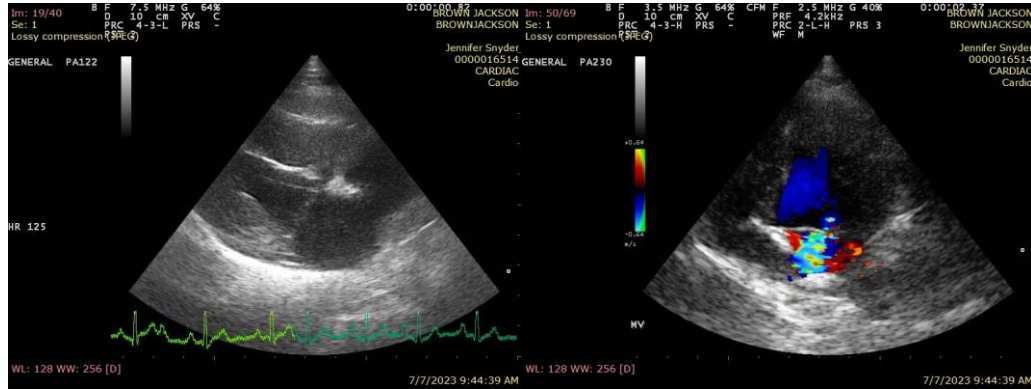
7/7/23

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PATIENT

Jackson Brown

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. 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

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631-804-5754

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