

PRESENTING CLINICAL SIGNS

DATE History: Presented for syncope and AV block. BNP WNL.

8/16/22 ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY: Left atrial size is normal. The mitral valve appears normal, though trace mitral regurgitation is present. Left ventricular wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic valve are normal. No heartworms are visualized. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

Kelly Vazquez

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA – 25.9 mm
IVSd – 7.1 mm
LVPWd – 6.4 mm
LVIDd – 27.2 mm
LVIDs – 17.9 mm
FS – 34%
RA – 20.3 mm
LVOT – 1.68 m/s
RVOT – 1.02 m/s

PATIENT

Shay Ghilardi

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

BREED

Boston Terrier

The only potential abnormalities in this exam are trace regurgitations of blood across Shay's mitral and tricuspid valves, which could either be normal physiologic variants or indicators of the presence of very mild valvular dysplasia. The hemodynamic effects of the regurgitations are negligible, and they are not contributing to Shay's syncopal episodes.

SEX

FS

Likely differentials for Shay's syncopal episodes include vasovagal syncope and high-grade second-degree AV block, though the latter was not identified in the submitted ECG video. A Holter and/or event monitor is recommended to determine whether more significant AV block could be present intermittently. An atropine response test (0.04 mg/kg IV followed by ECG 15-20 minutes later) is recommended to determine whether Shay's AV block is vagally-mediated or whether it is due to AV nodal disease.

AGE

8 mo

No therapy is recommended based on this exam. Should Shay's AV block be vagally-mediated, therapy with theophylline (~10 mg/kg BID) will likely eliminate it at home.

WEIGHT

16 lb

A recheck echocardiogram is recommended if new physical exam and/or clinical abnormalities suggestive of the presence of structural heart disease develop.

HOSPITAL NAME

Westwood Regional
VH

REFERRING VET

Dr. Cattiny



DATE

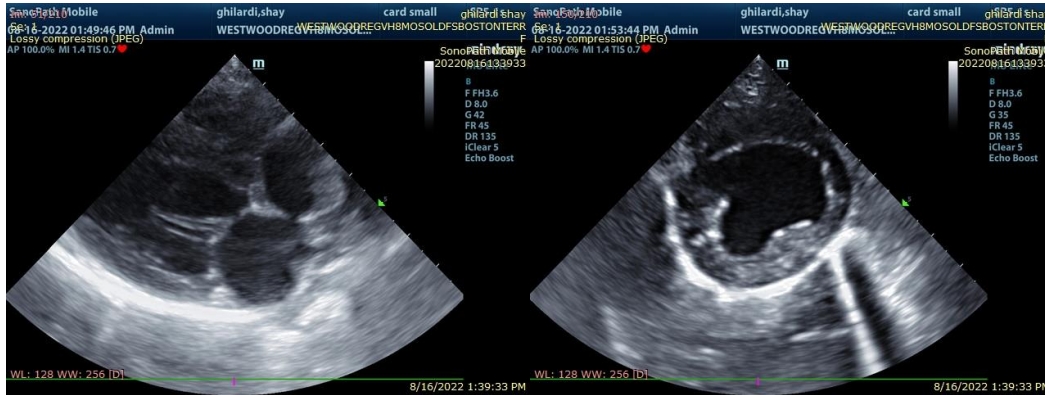
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

PATIENT

Shay Ghilardi

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.

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

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