



PATIENT

Doro Dennen

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spayed

AGE

14 years

WEIGHT

12.6lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Barnstable Animal
Hospital

REFERRING VET

Dr. Ware

INVOICE

25917

DATE

8/22/22

PRESENTING CLINICAL SIGNS

History: Recheck echo. History chronic valvular disease - Stage B2. Currently doing well at home. Grade III/VI systolic murmur, lungs clear. On Pimobendan 1.25mg q12h. BP: 98, 100, 100mmHg.

-Pertinent previous echo findings 99/11/20 Maggie Machen Lamy, DVM, DACVIM-Cardiology): LA 2.54 cm; LA:Ao 2.25; LV 2.64 cm; moderate LAE, moderate MR, moderate TR (2.07 m/s)

ECHOCARDIOGRAM FINDINGS

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

Left ventricle: The LV diameter is mildly increased with hyperdynamic myocardial function. LV wall thicknesses are normal.

Left atrium: The left atrium is moderately dilated.

Mitral valve: The mitral valve is thickened with prolapse into the left atrial lumen. Moderate 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: Mild to moderate RA dilation.

Tricuspid valve: The tricuspid valve appears mildly thickened with septal prolapse; moderate tricuspid regurgitation. Velocity consistent with mild pulmonary hypertension.

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.

2-Dimensional Measurements

Ao diam (cm)	1.2
LA diam (cm)	2.5
LA:Ao (Swe)	1.9
IVS thickness (cm)	0.6
LVID diastole (cm)	2.9
PW thickness (cm)	0.6
LVID systole (cm)	1.1
FS (%)	62

Doppler Measurements

PV Vmax (m/s)	0.7
AoV Vmax (m/s)	1.7
MR Vmax (m/s)	5.7
TR Vmax (m/s)	3.1
TR PG (mmHg)	40

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease persists with overall stability. Moderate mitral and tricuspid regurgitation are unchanged with stable left heart dimensions. Mild pulmonary hypertension is noted, which was not documented previously. Serial monitoring is advised. No additional issues are identified.

Given these findings, continue Pimobendan lifelong as prescribed. Assessment of progression in the future will help predict long term outcome, however prognosis is guarded at this stage (B2).



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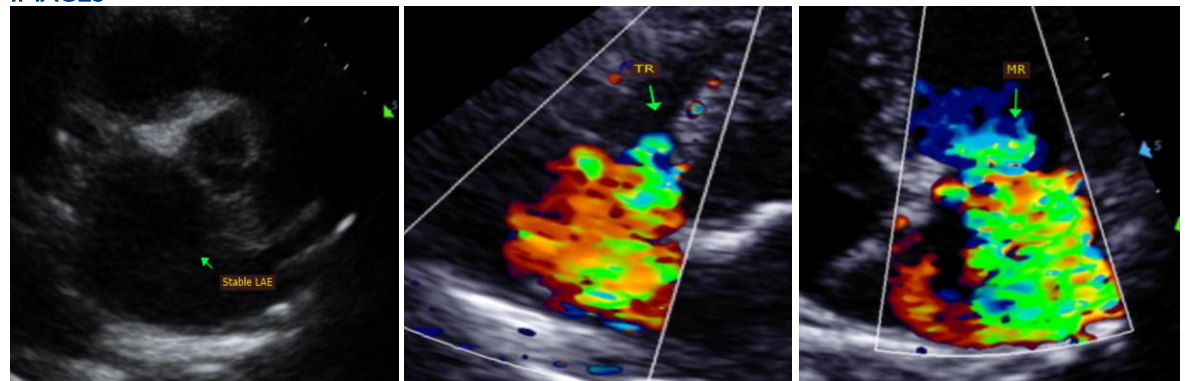
RECOMMENDATIONS

- Administer Pimobendan 0.25-0.3mg/kg PO q12h.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- Anesthetic risk is considered mild if needed. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 6 months, 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.

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