



**PATIENT**

Mylo Engineer

**SPECIES**

Canine

**BREED**

Miniature Pinscher

**SEX**

Male Intact

**AGE**

11 years

**WEIGHT**

9lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

Kelly Vazquez, CVT

**HOSPITAL NAME**

New Bridge  
Veterinary Practice

**REFERRING VET**

Dr. Glennon

**INVOICE**

20720

**DATE**

8/24/21

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Needs echo prior to cataract surgery.  
-Current medications: Pimobendan, Enalapril, Spironolactone.  
-Pertinent previous echo findings (2019 EL): Normal echocardiogram.

**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 mitral regurgitation with a normal left atrial dimension. Normal LV diameter with adequate 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 aortic valve is mildly thickened with mild to moderate aortic insufficiency. The pulmonic valve normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No 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)
<b>NORMAL PARAMETER</b>	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
<b>PATIENT</b>	NA	NA	1.3	1.2	52	90	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)
<b>NORMAL PARAMETER</b>	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
<b>PATIENT</b>	120	1.7	1.1	4.1	1.5	2.1	1.0
*Normal chamber parameters expressed as a mean value (SD)							
<b>BODY WEIGHT DEPENDENT PARAMETERS</b>							
*Note: All measurements based upon multi-modal images and methods. An average value is reported.							
Adapted from June Boon, Veterinary Echocardiography, 1998							
Rishniw M and Hollis NE, J Vet Intern Med 2000; 14:429-435							
Hansson et al, Vet Rad and Ultrasound 2002							
Bonagura et al. Echocardiography: principles of interpretation, Vet Clin North Am 15:1177, 1995							
				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
				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**

Overtly normal cardiac dimensions and function, with no obvious dysfunction or dilation of the left heart. Trace mitral and tricuspid regurgitation reflect early valve disease or may be physiologic in origin. Follow up is advised should a murmur be ausculted in the future. No significant valvular leaks are visualized, and no evidence of pulmonary hypertension. An aortic leak is identified, and a baseline blood pressure is recommended.



**PATIENT**

Mylo Engineer

Given these findings, no medications are indicated and medications can be safely discontinued. Triple therapy is being utilized without explanation; if this is for a cough, primary respiratory causes should be considered.

**SPECIES**

Canine

Monitor for development of a heart murmur, cough, labored breathing, exercise intolerance or collapse episodes.

**BREED**

Minature Pinscher

No cardiac contraindication for general anesthesia.

**SEX**

Male Intact

**PLAN**

Discontinue Pimobendan, Spironolactone and Enalapril as discussed. Consider primary respiratory disease if clinically relevant.

**AGE**

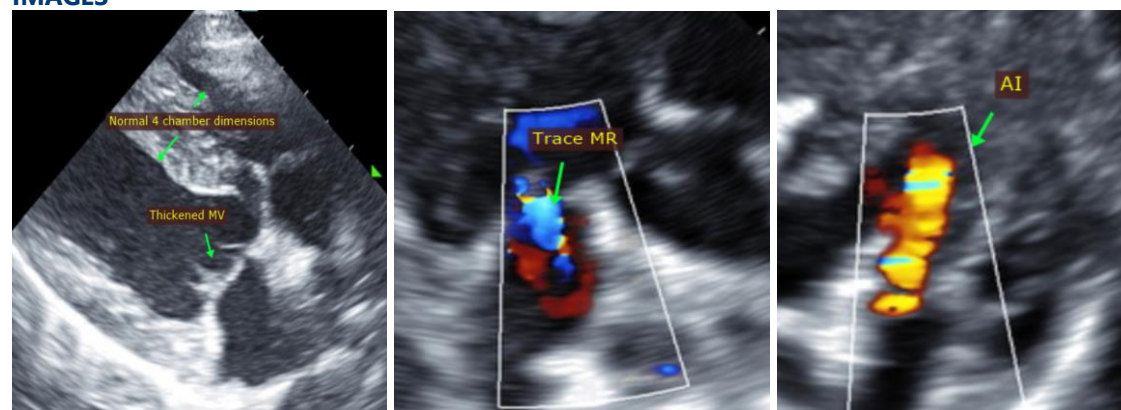
11 years

A recheck echocardiogram is recommended should a significant murmur develop, or signs of cardiac compromise be noted in the future.

**WEIGHT**

9lbs

**IMAGES**



**INTERPRETED BY**

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

**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.**

**IMAGING PERFORMED BY**

Kelly Vazquez, CVT

**HOSPITAL NAME**

New Bridge Veterinary Practice

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.

**REFERRING VET**

Dr. Glennon

**Maggie Machen Lamy, DVM**  
**Diplomate of the American College of Veterinary Internal Medicine (Cardiology)**  
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