



PATIENT

Piper Grimaldi

SPECIES

Canine

BREED

Boxer

SEX

Female Spayed

AGE

7 years

WEIGHT

91.8lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Specialty Services

REFERRING VET

Dr. Masloski

INVOICE

20745

DATE

8/25/21

PRESENTING CLINICAL SIGNS

History: Recheck echo. Was seen in November 2018 for an arrhythmia. Her echo study was normal. ECG showed frequent, singular, VPCs. Piper is presently doing well at home with no coughing, dyspnea, or collapse episodes. Good appetite and energy. On exam, NSR, no murmurs noted, PSS, lung fields clear. BP: 160-170mmHg.

-Current medications: Sotalol 60mg 1 tab twice a day *No sedation
-Pertinent previous echo findings: LA 2.87 cm; LA:Ao 1.13; LV 4.32 cm; FS 39%. mild thickening MV, trace MR, no TR, was panting heavily during exam, suboptimal image clarity.

ELECTROCARDIOGRAPHIC FINDINGS *Note: Single lead ECGs are evaluated as a rhythm strip. Morphology/MEA cannot be definitively commented on.

A single lead ECG is available; 25mm/s, 20mm/mV. The average heart rate is 90bpm (range 45-125bpm). The rhythm is sinus in origin, with a p for every QRS complex and vice versa. P and QRS morphologies are positive. No ectopic beats, pauses or dysrhythmias observed.

ECG diagnosis: Normal sinus rhythm with respiratory variation.

ECHOCARDIOGRAM FINDINGS

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

Left ventricle: The LV diameter is normal with adequate myocardial function. LV wall thicknesses are normal.

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is mildly thickened with no prolapse into the left atrial lumen. No mitral regurgitation.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal 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: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears normal with no tricuspid regurgitation.

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)	2.4
LA diam (cm)	3.0
LA:Ao (Swe)	1.3
IVS thickness (cm)	1.0
LVID diastole (cm)	4.2
PW thickness (cm)	1.1
LVID systole (cm)	2.4
FS (%)	43

Doppler Measurements

PV Vmax (m/s)	0.85
AoV Vmax (m/s)	1.4
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA



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INTERPRETATION OF THE FINDINGS

Overtly normal cardiac structure and function persists. No obvious significant valve regurgitation is seen, and no structural issues identified.

Additionally, the screening ECG is also normal with no VPCs identified. This is likely due to treatment with Sotalol and suggestive of adequate control. It is important to note that the gold standard way to screen these patients is through periodic holter monitoring, which can be considered.

Assuming the diagnosis was/is ARVC, the prognosis is highly variable with some dogs succumbing to malignant arrhythmias and others remaining stable for a period of months to years. It is certainly encouraging that this patient continues to do well given the time frame.

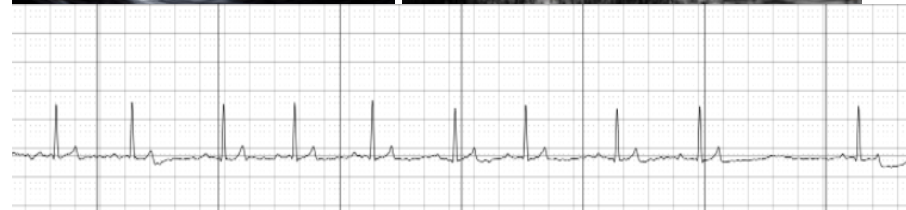
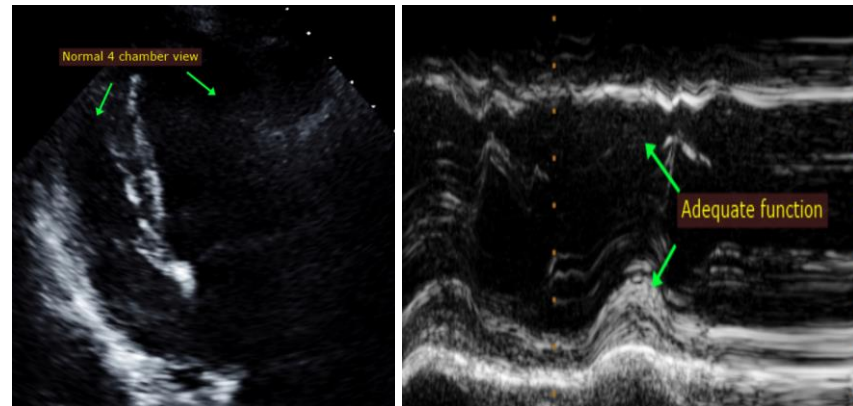
RECOMMENDATIONS

- No additional medications are indicated. Continue Sotalol as prescribed.
- Consider a periodic holter monitor as discussed.
- Omega fatty acid supplementation is recommended for any arrhythmic patient.
- No cardiac contraindication for general anesthesia at this time.
- Monitor for a murmur, cough, labored breathing or exercise intolerance.

PLAN

- Recommend recheck echocardiogram annually with screen ECG/holter monitoring every 6 months, sooner if any collapse develop.

IMAGES





PATIENT
Piper Grimaldi

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.

SPECIES
Canine

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.

BREED
Boxer

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

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Female Spayed

Echocardiogram performed by: Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)

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