

PATIENT

Scout Ross

PRESENTING CLINICAL SIGNS

History: Breed screening exam.

SPECIES

Canine

BREED

Scottish Deerhound

SEX

Female

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The mitral valve leaflets are mildly thickened with abnormal closure. Trace/mild central mitral regurgitation with a normal left atrial dimension. Normal MR velocity. The LV is mildly dilated in both systole and diastole for this body size (LVIDdN: 1.8, LVIDsN: 1.3), with borderline myocardial dysfunction. The tricuspid valve appears normal with trace tricuspid regurgitation. Borderline normal TR velocity. Normal right atrial and ventricular diameter and morphology. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No aortic or pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

CARDIAC CHART

AGE

2 years

WEIGHT

88.2lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Jacque Pankatz,
DVM

HOSPITAL NAME

Mountain Vista
Veterinary Hospital

REFERRING VET

Dr. Pankatz

INVOICE

26014

DATE

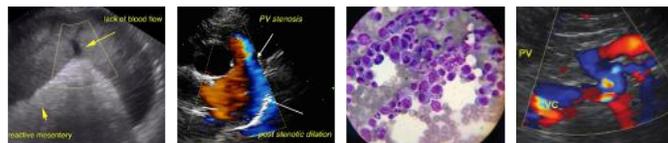
8/25/22

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	5.3	2.9	1.5	1.3	25	48	0.5
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)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	NM	2.0	1.6	40.0	3.5	5.6	4.2
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
BODY WEIGHT DEPENDENT PARAMETERS				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>				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)

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Several mild abnormalities are identified. Most concerning is the LV measures mildly enlarged for this body size with borderline systolic dysfunction. While this may certainly be a normal variant in this breed (i.e., nonprogressive), follow up is advised. Recommend ensure no contributing factors are at play, such as a non-traditional diet or hypothyroidism. There is also mild mitral valve dysplasia with a small mitral regurgitation. Again, the finding is mild; however, may reflect a predisposition for mitral valve abnormalities. Finally, the tricuspid leak, while minimal, does show borderline elevated pulmonary pressures which is of unknown significance. No additional issues are identified.



PATIENT

Scout Ross

SPECIES

Canine

BREED

Scottish Deerhound

SEX

Female

AGE

2 years

WEIGHT

88.2lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Jacque Pankatz,
DVM

HOSPITAL NAME

Mountain Vista
Veterinary Hospital

REFERRING VET

Dr. Pankatz

INVOICE

26014

DATE

8/25/22

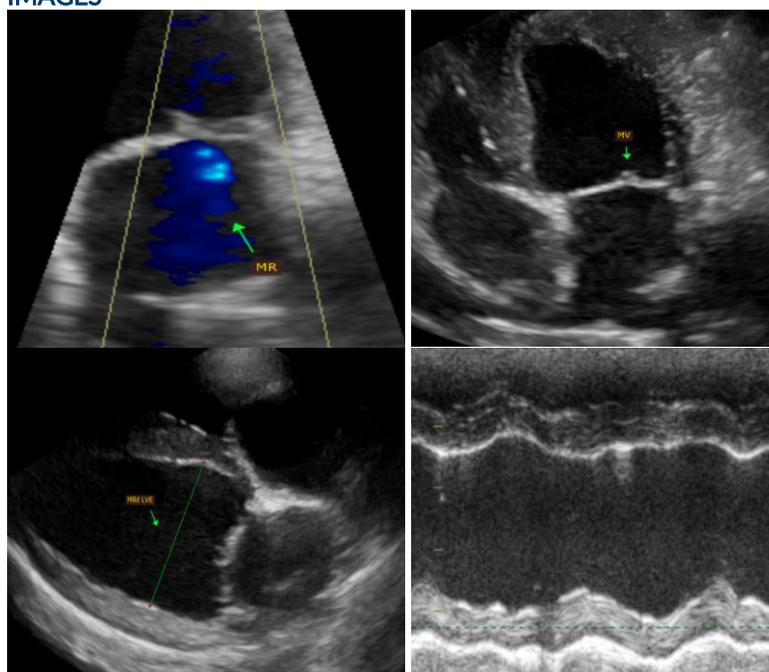
This patient falls in the equivocal category for breeding purposes. While what is seen here should not affect the life of the animal, there is concern for progressive changes going forward. **Highly recommend an OFA evaluation as the gold standard breed screening examination performed by an Attending Cardiologist in this case. If declined or not possible, consider a recheck in 6 months prior to proceeding with a breeding program.**

Monitor for development of a heart murmur, cough, labored breathing, etc.

PLAN

Consider referral for an OFA screening exam. If declined, recheck in 6 months prior to proceeding, then annually lifelong.

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