


**PRESENTING CLINICAL SIGNS**

History: Grade 4/6 murmur. Radiographs in June showed cardiomegaly. Receiving pimobendan (0.625 mg BID) and cough tabs.

**DATE**

8/25/23

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**

Sands Hill MVU

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

There is moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. There is Doppler evidence of mitral regurgitation present. There is moderate left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal, though trace aortic insufficiency is present. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and there is Doppler evidence of tricuspid regurgitation present. TR velocity is consistent with the presence of moderate pulmonary hypertension (PG 57.7 mmHg). The pulmonary artery and pulmonary appear normal, though trace pulmonary insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen. No peritoneal effusion is present.

ECG during echo: Sinus rhythm

**PATIENT**

Baci Holcomb

LA - 40.1 mm  
LVIDd - 39.0 mm  
LVIDs - 18.7 mm  
FS - 52%  
RA - 23.9 mm  
LVOT - 1.07 m/s  
RVOT - 1.02 m/s  
TR - 3.80 m/s

**SPECIES**

Canine

**ASSESSMENT/RECOMMENDATIONS**
**BREED**

Fox Terrier

Degenerative mitral and tricuspid valve disease  
Pulmonary hypertension

**SEX**

MN

**AGE**

15 y

Today's echocardiogram demonstrates regurgitation of blood across Baci's mitral and tricuspid valves resulting from degenerative valve disease. Baci's tricuspid valve disease is mild, as evidenced by the absence of secondary right heart chamber dilation. His mitral valve disease is more advanced, as Baci has moderate secondary dilation of both his left atrium and left ventricle, as well as moderate secondary pulmonary hypertension. Given these findings, Baci is at risk for the development of clinical signs, such as coughing, exercise intolerance, syncope, and labored breathing, therefore, careful monitoring for these is recommended.

Baci's current therapy with pimobendan is appropriate based on this exam, though I recommend increasing his dose to 2.5 mg BID. I also recommend treating Baci's pulmonary hypertension with sildenafil (10 mg BID).

**WEIGHT**

20 lb

A recheck echocardiogram is recommended in 6 months. Repeat thoracic radiographs are recommended if Baci experiences difficulty breathing.

**HOSPITAL NAME**

Sands Hill MVU

**REFERRING VET**

Dr. Lantzer



DATE

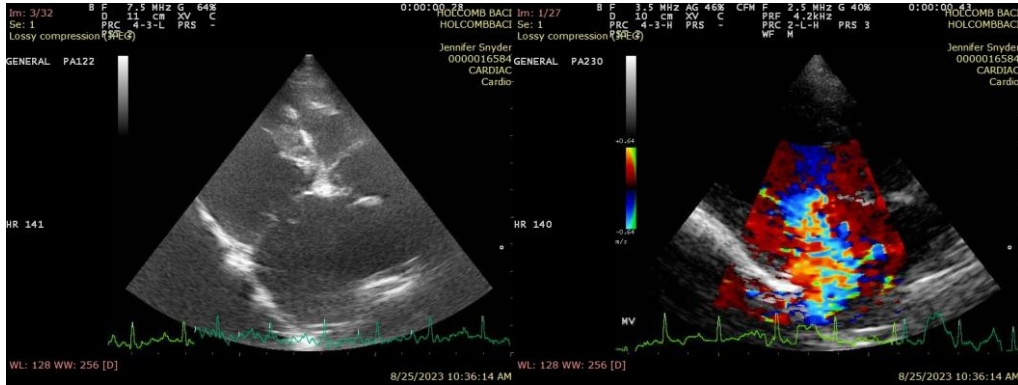
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

PATIENT

Baci Holcomb

Keith Blass, DVM, MS, DACVIM (Cardiology)  
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631-804-5754

SPECIES

Canine

BREED

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