
PRESENTING CLINICAL SIGNS

DATE History: Murmur since last year. Asymptomatic. Pre-anesthetic evaluation (dental).

8/26/22 ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY: There is very mild left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. There is Doppler evidence of mitral regurgitation present. There is very mild left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

PATIENT

Cooper Andrews

LA - 29.1 mm
 LVIDd - 28.9 mm
 LVIDs - 15.3 mm
 FS - 46.9%
 RA - 16.0 mm
 LVOT - 1.17 m/s
 RVOT - 0.79 m/s

ASSESSMENT/RECOMMENDATIONS

SPECIES Degenerative mitral valve disease

Canine

BREED This examination demonstrates regurgitation of blood across Cooper's mitral valve resulting from degenerative valve disease. Secondary to his regurgitation, Cooper has very mild dilation of both his left atrium and left ventricle, though his left ventricular systolic function is well-preserved. As only very mild left heart chamber dilation is present, Cooper's current risk for the development of clinical signs secondary to his disease, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be fairly low, though careful monitoring for these signs is recommended going forward.

Yorkie Mix

SEX Cooper's cardiovascular risk for general anesthesia is mildly increased based on this exam, therefore, some precautions should be taken in order to minimize this risk. I recommend avoiding the use of alpha-2 agonists, ketamine, and telazol in the anesthetic protocol, as well as reducing the IV fluid rate by 25%. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

MN

AGE I recommend starting Cooper on pimobendan (2.5 mg BID), as this medication should help to slow the progression of his mitral valve disease, as well as decrease his risk for general anesthesia.

13 y

A recheck echocardiogram is recommended in 9 months. Thoracic radiographs are recommended if Cooper experiences respiratory clinical signs.

WEIGHT

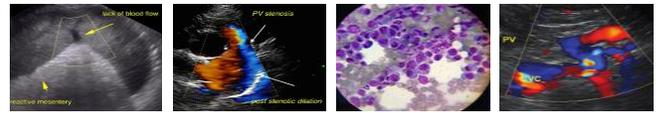
17 lb

HOSPITAL NAME

Swart Veterinary
 Imaging

REFERRING VET

Dr. Swart



DATE

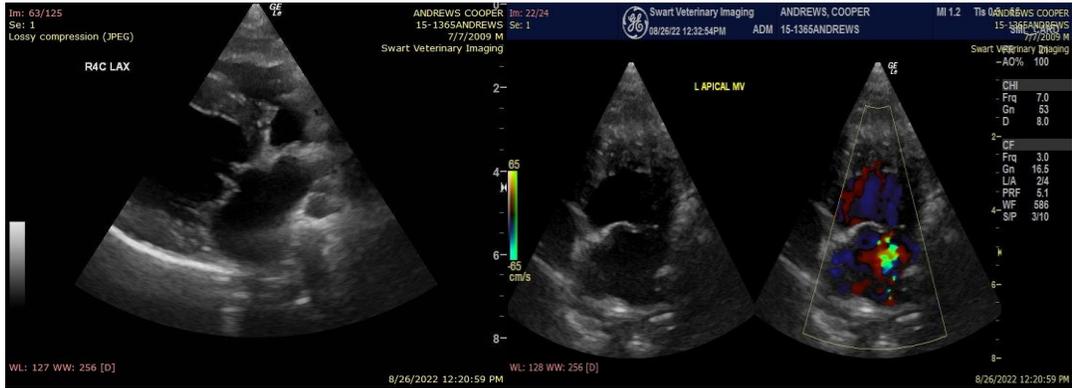
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

PATIENT

Cooper Andrews

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.

SPECIES

Canine

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631-804-5754

BREED

Yorkie Mix

SEX

MN

AGE

13 y

WEIGHT

17 lb

HOSPITAL NAME

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Imaging

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