
RESENTING CLINICAL SIGNS

History: Has MCT removed and microfilaria noted in histopathology. HW positive. Had one dose of melarsomine a month ago, as well as doxycycline and steroids. Due for second injection today but acute onset of dullness. PE – muffled heart sounds. Radiographs – globoid cardiac silhouette.

DATE

8/30/21

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Dr. Brian Barnes

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

A mild to moderate volume pericardial effusion is present. Left atrial size is normal. The mitral valve is normal. Left ventricular dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. There is diastolic collapse of the right atrial free wall. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic valve are normal. No heartworms are visualized. No shunting lesions are visualized. No cardiac masses are seen.

ECG during echo: Sinus rhythm with rare VPCs

PATIENT

Roxy Thiesen

 LA – 36.4 mm
 LVIDd – 32.9 mm
 LVIDs – 20.0 mm
 FS – 39%
 RA – 31.6 mm
 LVOT – 1.40 m/s
 RVOT – 1.10 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

 Pericardial effusion
 Ventricular premature complexes (VPCs)

BREED

Boxer

This examination demonstrates a mild to moderate volume of pericardial effusion with 2D evidence of cardiac tamponade, which is very likely the cause of Roxy's dullness. No obvious reason for the effusion is appreciated in the image set, though the two primary causes of pericardial effusion in dogs are cardiac neoplasia and idiopathic effusion. While no evidence of neoplasia was identified in this exam, its presence cannot be ruled out, as echocardiography is only ~70% sensitive at detecting cardiac masses.

SEX

FS

Roxy's heartworm infection does not appear to be related to her pericardial effusion formation.

AGE

8 y

Roxy's ECG shows the presence of rare VPCs, which could potentially be secondary to her pericardial effusion, however, given her breed, the presence of arrhythmogenic right ventricular cardiomyopathy (ARVC) cannot be ruled out.

WEIGHT

34.3 kg

Pericardiocentesis is recommended to relieve Roxy's tamponade. A sample of effusion should be submitted for analysis/cytology.

Roxy's second melarsomine injection should be delayed a few days until she is back to feeling normal.

HOSPITAL NAME

Westview VH

A cardiac CT or MRI can be considered to more comprehensively evaluate for the presence of a mass. If not pursued, a recheck echocardiogram is recommended in 3-4 months, sooner if clinical signs compatible with tamponade recur.

REFERRING VET

Dr. Barnes



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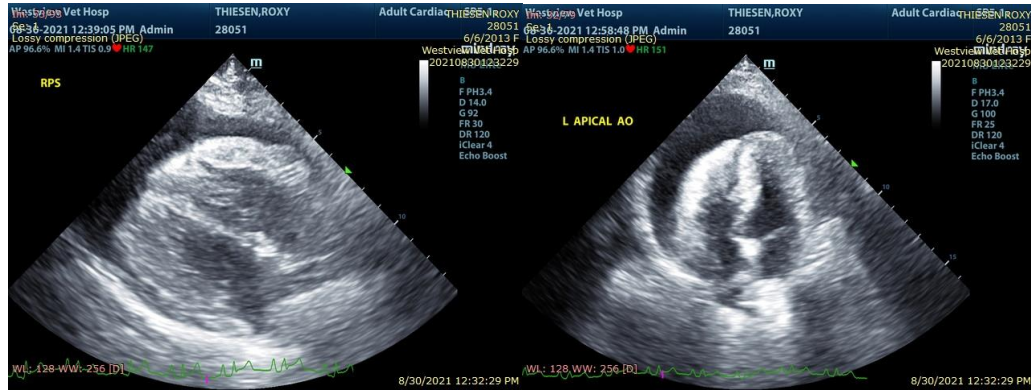
34.3 kg

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REFERRING VET

Dr. Barnes



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.

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