



PATIENT

Rocky Stout

SPECIES

Canine

BREED

Boxer

SEX

Male Neutered

AGE

5 years

WEIGHT

80.1lbs

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

20793

DATE

8/31/21

PRESENTING CLINICAL SIGNS

History: Recheck echo. History mild subaortic stenosis. Current presentation: Rocky was initially noted to have a heart murmur in July 2015. Echocardiograms done in September 2018 and October 2019 revealed a mild SAS. Early this month, Rocky had a syncopal vs seizure event. He was lying on the bed, looked at the family and started convulsing/shaking his head. The incident lasted approximately 2 minutes and then Rocky seemed to snap out of it quickly. He has not had any further incidents. He is presently eating well---Origin grain free diet for the past 2 years. The family is trying to restrict his activity at this point. CV/RESP: NSR, no murmurs noted, PSS, lung fields clear. BP: 140mmHg x 3.
-Pertinent previous echo findings (9/14/18): LA 2.46 cm; LA:Ao 1.14; LV 4.09 cm; LVOT 2.46 m/s, trivial AI; spicule at basilar IVS.

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 minimally increased.

Left atrium: The left atrium is normal.

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

Aortic valve/Aorta: The aortic valve appears trileaflet with normal mobility. Mildly elevated aortic outflow velocity. No sub-aortic ridge can be seen; however, subtle narrowing is appreciated. 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.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 150bpm.

2-Dimensional Measurements

Ao diam (cm)	2.5
LA diam (cm)	3.3
LA:Ao (Swe)	1.3
IVS thickness (cm)	1.2
LVID diastole (cm)	3.9
PW thickness (cm)	1.2
LVID systole (cm)	2.4
FS (%)	38

Doppler Measurements

PV Vmax (m/s)	1.3
AoV Vmax (m/s)	2.3
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

INTERPRETATION OF THE FINDINGS

Mild subaortic stenosis (SAS) persists with mildly elevated outflow velocity through the aortic root. This is clinically insignificant in this case given the minimal degree of



PATIENT
Rocky Stout

obstruction and overall normal cardiac structure and function at 5yo. No additional issues are identified in this study and the systolic function is intact. Regardless, **a diet change remains recommended as the conservative approach.**

SPECIES
Canine

No obvious structural cause for the episode is seen here. There is suspicion for an arrhythmic issue and a holter monitor should be considered, particularly should the episodes persist. This is likely independent of structural changes as this dog is approaching the typical age of onset for ARVC. Close follow up is advised.

BREED
Boxer

RECOMMENDATIONS

- Given these findings, no cardiac medications are clearly indicated.
- Monitor for development of labored breathing, exercise intolerance or collapse episodes, as SAS patients are more predisposed to development of arrhythmias than to CHF.
- Consider a holter monitor, particularly should the episodes recur.
- Omega fatty acid supplementation (1000mg 1-2x daily) may be of some long-term benefit for dogs predisposed to arrhythmias.
- If needed, anesthetic risk is mildly elevated. Avoid heart rate stimulating drugs such as atropine or glycopyrrolate unless clinically indicated. Avoid ketamine and acepromazine due to peripheral vascular effects. Mild IV fluid restriction is advised. Recommend prophylactic antibiotics prior to and during any orthopedic or dental procedure in the future given predisposition to endocarditis.

SEX
Male Neutered

AGE
5 years

WEIGHT
80.1lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

PLAN

- Recommend recheck echocardiogram in 1 year to screen for any progressive changes, sooner if any clinical signs arise.

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDCS

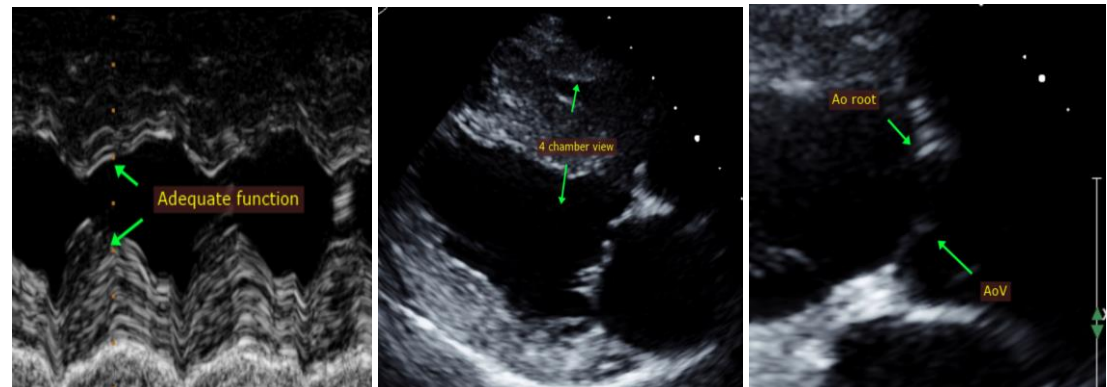
HOSPITAL NAME

Mass Veterinary
Specialty Services

REFERRING VET

Dr. Masloski

IMAGES



INVOICE

20793

DATE

8/31/21



PATIENT
Rocky Stout

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

SEX
Male Neutered

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

AGE
5 years

WEIGHT
80.1lbs

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

20793

DATE

8/31/21