



PATIENT

Ariel Heath

SPECIES

Canine

BREED

German Shepherd Mix

SEX

Female Spayed

AGE

13 years

WEIGHT

67.8lbs

PRESENTING CLINICAL SIGNS

History: Recheck echo. History chronic valvular disease - Stage B1; history isolated VPCs. Current, Ariel is doing well at home. On exam: NSR, no murmurs noted, PSS, lung fields clear. BP: 180mmHg x 4. Current medications: 1) Trazadone 100mg 1/2 tab twice a day 2) Gabapentin 100mg 2 capsules twice a day *No sedation for study.
-Pertinent previous echo findings (1/4/22 Meghan Allen, DVM, DACVIM-Cardiology): LA 3.37 cm; LV 3.65 cm.

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 normal.

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is mildly thickened with no prolapse into the left atrial lumen. Trace/mild eccentric mitral regurgitation.

Aortic valve/aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. Prominent aortic root. Trace 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.

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

2-Dimensional Measurements

Ao diam (cm)	3.0
LA diam (cm)	3.0
LA:Ao (Swe)	1.0
IVS thickness (cm)	1.1
LVID diastole (cm)	3.1
PW thickness (cm)	1.1
LVID systole (cm)	2.2
FS (%)	29

Doppler Measurements

PV Vmax (m/s)	0.4
AoV Vmax (m/s)	0.7
MR Vmax (m/s)	NM
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

IMAGING

PERFORMED BY

Pamela Harrigan,
RDCS

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease persists with trace/mild mitral regurgitation. Lack of significant left atrial enlargement indicates the current risk for complication is low. A prominent aortic root is noted with a small aortic insufficiency. The reported blood pressure is elevated and should be assessed for persistence and need for medication, given these findings. No additional issues are noted in this study. Compared to what is available from the prior study, there is no obvious progression with persistently mild disease.

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Masloski

INVOICE

26116

DATE

8/31/22

Assessment of progression in the future will help predict long term prognosis, which is highly variable at this stage (B1).



PATIENT

Ariel Heath

SPECIES

Canine

BREED

German Shepherd Mix

SEX

Female Spayed

AGE

13 years

WEIGHT

67.8lbs

INTERPRETED BY

Maggie Machen Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Masloski

INVOICE

26116

DATE

8/31/22

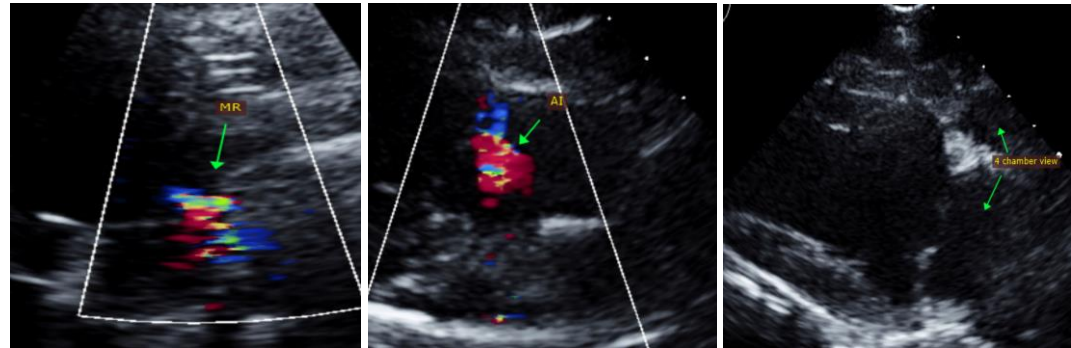
RECOMMENDATIONS

- No cardiac medications are clearly indicated.
- Reassess BP and treat if indicated.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- Anesthetic risk is considered mild if needed. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 6-12 months, sooner if any development of clinical signs.

IMAGES

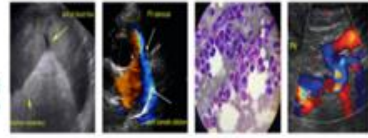


The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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



PATIENT

Ariel Heath

SPECIES

Canine

BREED

German Shepherd Mix

SEX

Female Spayed

AGE

13 years

WEIGHT

67.8lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Services

REFERRING VET

Dr. Masloski

INVOICE

26116

DATE

8/31/22