


RESENTING CLINICAL SIGNS

DATE History: Grade 3-4/6 murmur heard bilaterally. Dyspneic the past few days. Chronic goose honk cough. Lasix has helped. HW negative.

8/5/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

There is mild left atrial dilation. The mitral valve leaflets are thickened, and there is Doppler evidence of mitral regurgitation present. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. There is mild to moderate right atrial dilation. Right ventricular dimensions are normal. The tricuspid valve leaflets are thickened, and there is Doppler evidence of tricuspid regurgitation present. TR velocity is consistent with the presence of moderate pulmonary hypertension (PG 64 mmHg). There is flattening of the interventricular septum. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen. Moderate pleural and scant peritoneal effusions are visible.

PATIENT

Tiny Dog Green

LA - 22.2 mm
LVIDd - 20.4 mm
LVIDs - 9.8 mm
FS - 52%
RA - 22.5 mm
LVOT - 0.74 m/s
RVOT - 0.60 m/s
TR - 4.00 m/s

SPECIES

Canine

BREED

Chihuahua

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease
Pulmonary hypertension

SEX

FS

AGE

~11 y

WEIGHT

6 lb

This examination demonstrates regurgitation of blood across Tiny Dog's mitral and tricuspid valves resulting from degenerative valve disease. Secondary to her mitral regurgitation, Tiny Dog has mild dilation of her left atrium. As only mild dilation is present, it's unlikely that mainstem bronchial compression is contributing to Tiny Dog's cough, and it's unlikely that left-sided congestive heart failure is contributing to her dyspnea. Secondary to her tricuspid regurgitation, Tiny Dog has mild to moderate dilation of her right atrium. In addition, Tiny Dog's tricuspid regurgitation velocity is consistent with the presence of moderate pulmonary hypertension, which has likely developed secondary to the underlying cause of her cough. Given these findings, it's likely that Tiny Dog's dyspnea, which is due to the presence of pleural effusion, is the result of the development of right-sided congestive heart failure. In addition to R-CHF, Tiny Dog is at risk for the development of exercise intolerance and syncope, therefore, careful monitoring for these signs is recommended.

HOSPITAL NAME

Swart Veterinary
Imaging

Thoracocentesis is recommended to remove Tiny Dog's pleural effusion and rapidly improve her clinical signs. Recommended maintenance therapy based on this exam includes Lasix (6.25 mg BID), enalapril (1.25 mg BID), pimobendan (1.25 mg am, 0.625 mg pm), spironolactone (6.25 mg SID), and sildenafil 5 mg TID).

Recheck radiographs and a renal/electrolyte profile are recommended in 1 week. A recheck echocardiogram is recommended in 4-6 months.

REFERRING VET

Dr. Swart



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PATIENT

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FS

KeithBlass@gmail.com
631-804-5754

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~11 y

WEIGHT

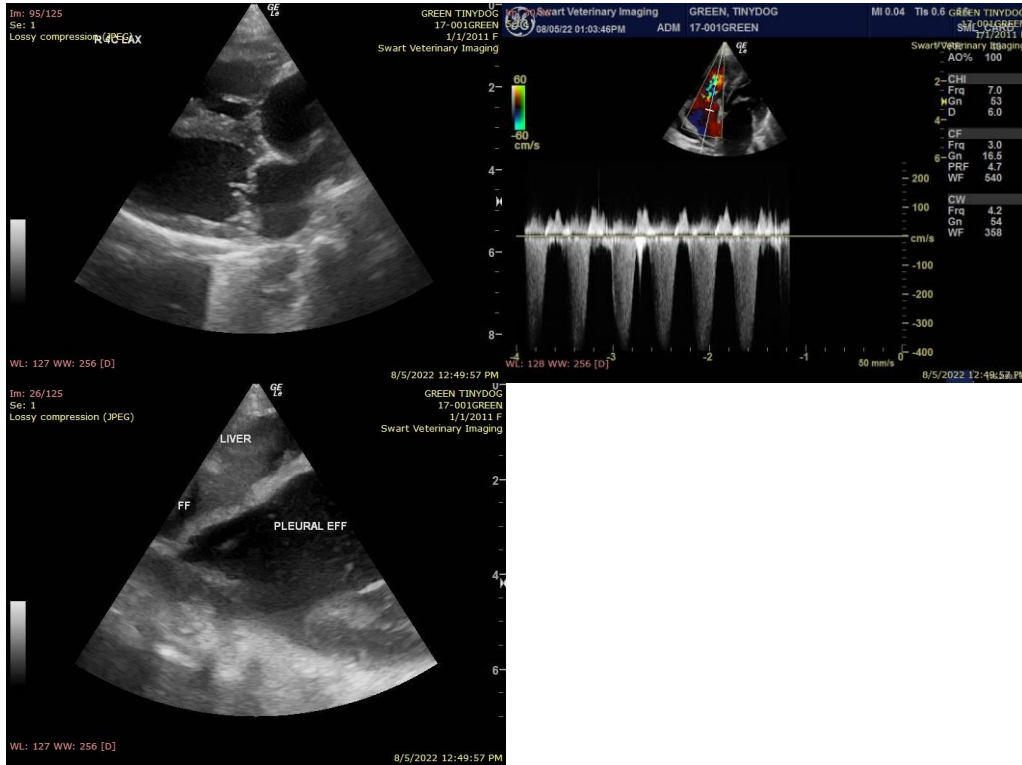
6 lb

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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.