



PATIENT

Whimsey Somers

PRESENTING CLINICAL SIGNS

History: Recheck echo. Asymptomatic. No current medications.
-Pertinent previous echo findings (7/2021 MML): Mild MR, no LA or LVE.

SPECIES

Canine

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Diffuse thickening of mitral valve leaflets with no prolapse into the left atrial lumen. Trace eccentric mitral regurgitation with no left atrial dilation. Normal LV diameter with borderline myocardial dysfunction. The tricuspid valve appears normal with trace tricuspid regurgitation. Normal velocity. Normal right atrial and ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No obvious aortic and trace pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

BREED

Sheltie

SEX

Female Spayed

CARDIAC CHART

AGE

4 years

| CANINE CARDIAC PARAMETERS | MR VMAX (m/s) | TR VMAX (m/s) | LA/AO (Boon method) | LA/AO (Heart Base; Swe) | FS (%) | EF (%) | EPSS (cm) |
|---|---------------|---------------|---------------------|-------------------------|---------------------------------|--|--|
| NORMAL PARAMETER | 4.5-5.5 | <2.7 | 1.3 | <1.6 | 28-40 | 40-100 | <0.6 |
| PATIENT | NM | 1.8 | 1.4 | 1.4 | 27 | 54 | 0.28 |
| CANINE CARDIAC PARAMETERS | HR (BPM) | AV VMAX (m/s) | PV MAX (m/s) | BODY WEIGHT (kg) | LA 2D short axis Base view (cm) | LVIDd Avg; 2D and m-mode short axis (cm) | LVIDs Avg; 2D and m-mode short axis (cm) |
| NORMAL PARAMETER | 50-100 | 0.7-1.7 | 0.7-1.6 | BELOW | BELOW | BELOW | BELOW |
| PATIENT | 126 | 1.1 | 0.84 | 11.3 | 1.9 | 3.1 | 2.3 |
| *Normal chamber parameters expressed as a mean value (SD) | | | | 3 | 1.27 (5.3) | 2.46 (2.46) | 1.36 (5.5) |
| BODY WEIGHT DEPENDENT PARAMETERS | | | | 5 | 1.40 (4.5) | 2.74 (5.2) | 1.60 (4.7) |
| <i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i> | | | | 10 | 1.50 (3.8) | 3.27 (3.5) | 2.06 (3.1) |
| | | | | 15 | 1.83 (2.0) | 3.71 (2.4) | 2.43 (2.1) |
| | | | | 20 | 2.02 (1.9) | 4.14 (2.2) | 2.80 (2.0) |
| Adapted from June Boon, Veterinary Echocardiography, 1998 | | | | 25 | 2.18 (2.4) | 4.48 (2.9) | 3.10 (2.5) |
| Rishniw M and Hollis NE, J Vet Intern Med 2000; 14:429-435 | | | | 30 | 2.33 (3.3) | 4.83 (3.9) | 3.39 (3.4) |
| Hansson et al, Vet Rad and Ultrasound 2002 | | | | 35 | 2.48 (4.3) | 5.17 (5.0) | 3.69 (4.5) |
| Bonagura et al. Echocardiography: principles of interpretation, Vet Clin North Am 15:1177, 1995 | | | | 40 | 2.62 (5.2) | 5.48 (6.1) | 3.96 (5.4) |
| | | | | 50 | 2.88 (7.1) | 6.07 (8.3) | 4.46 (7.4) |

WEIGHT

24.9lbs

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY

C. Belan, DVM

HOSPITAL NAME

Signal Hill Animal Hospital

REFERRING VET

Dr. Leboldus

INVOICE

25608

DATE

8/5/22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chronic degenerative valve disease persists with evidence of stability. Trace leaks are noted in the mitral and tricuspid valves without significant chamber enlargement. Of mild concern, the systolic function is borderline for this signalment (a slight decline from the prior exam). Consider screening for contributing factors, such as an atypical diet or hypothyroidism. No additional issues are identified.

Given these findings, no cardiac medications are indicated. Continued assessment of progression in the future will help predict long term prognosis, which is highly variable at this stage (B1). Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.



PATIENT

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Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

SPECIES

Canine

No cardiac contraindication for general anesthesia prior to chamber enlargement.

BREED

Sheltie

SEX

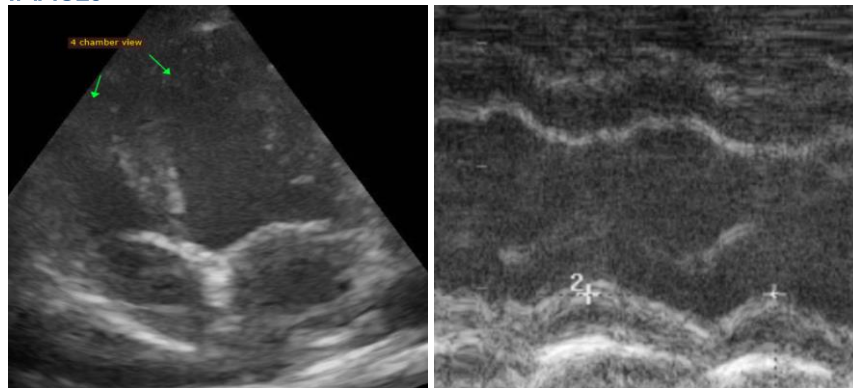
Female Spayed

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

AGE

4 years

IMAGES



WEIGHT

24.9lbs

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.

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

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.

IMAGING PERFORMED BY

C. Belan, DVM

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

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