



PATIENT

Stoli Blue Schwandt

SPECIES

Canine

BREED

French Bulldog

SEX

Female Spayed

AGE

3 years

WEIGHT

23lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Andy Carver, DVM

HOSPITAL NAME

Rec River Animal
Emergency Hospital
& Referral Center

REFERRING VET

Dr. Carver

INVOICE

21065

DATE

9/16/21

PRESENTING CLINICAL SIGNS

History: Recheck echo. Grade 2 systolic murmur, left side, no other pertinent exam findings.

-Blood pressure: 128mmHg.

-Current medications: Atenolol 6.25mg PO BID.

-Pertinent previous echo findings (7/2020 MML): Diagnosed with mitral valve dysplasia and LVOTO.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is mildly hypertrophied (0.8cm globally). There is a diffusely hyperechoic endocardium consistent with remodeling. Mild papillary muscle hypertrophy. The left atrium is normal. The right atrium is normal in size. The right ventricle appears normal. The anterior leaflet of the mitral valve is dysplastic, with an elongated thickened appearance. No obvious prolapse into the LVOT is identified. No mitral regurgitation. No tricuspid regurgitation seen. Blood flow through the LVOT is normal. No aortic insufficiency noted. No obvious shunts. No evidence of cardiac tumors or metastatic lesions on this scan. No pleural or pericardial effusion seen.

CARDIAC CHART

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	NA	NA	NM	1.3	42	80	NM
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	NM	1.37	0.9	10.4	1.8	2.4	1.4
*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)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)
				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)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Compared to the prior study, there is evidence of significant improvement on Atenolol.

Previously severe LVH has dramatically improved and no further LVOTO is identified. This is great news as the patient has responded well to therapy. Prognosis is open long-term; however, serial monitoring is advised.

Continue Atenolol as prescribed with no additional medications indicated.



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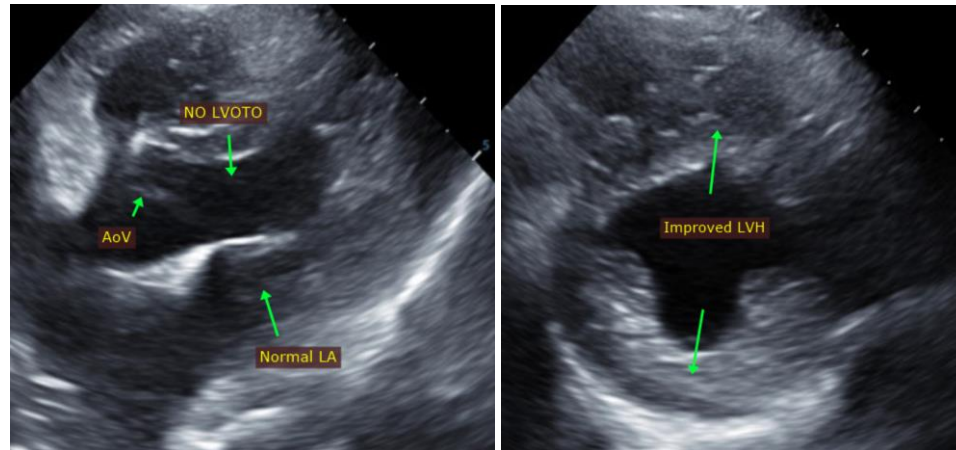
Monitor at home for any respiratory signs or clinical lethargy/collapse.

PLAN

Continue Atenolol as prescribed.

Recommend recheck echocardiogram annually to screen for any progressive changes.

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.

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