



PATIENT

Gatsby Stagliano

SPECIES

Canine

BREED

Yorkie

SEX

Male Neutered

AGE

11 years

WEIGHT

5.5lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Millburn Veterinary
Hospital

REFERRING VET

Dr. Turowsky

INVOICE

26475

DATE

9/21/22

PRESENTING CLINICAL SIGNS

History: Recheck echo. Recently increased RRR (~36bpm). Minimal coughing, otherwise doing well. Grade V/VI left systolic murmur.

-Current medications: Furosemide 12.5mg BID, Vetmedin 1.25mg AM + 0.625mg PM, Benazepril 1.25mg SID, Spironolactone 6.25mg SID.

-Pertinent previous echo findings (4/2022 MML): Severe MR, severe LAE, moderate LVE, mild TR.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Diffuse thickening of mitral valve leaflets with prolapse into the left atrial lumen. Severe eccentric mitral regurgitation with severe progressive left atrial dilatation. Normal MR velocity. Moderate LV dilation with hyperdynamic myocardial function. The tricuspid valve appears normal with mild tricuspid regurgitation. Velocity consistent with early pulmonary hypertension. Normal right atrial and ventricular diameter and morphology. The pulmonic valve is normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. Aortic and pulmonic valve appears normal with no obvious aortic or pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

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	5.5	3.0	2.2	2.5	50	83	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	200	1.1	0.7	2.5	2.2	3.0	1.2
*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

Chronic degenerative valve disease persists with overall stability. Severe mitral and mild tricuspid regurgitation are unchanged. Severe left atrial enlargement compared to what is seen in the prior study indicates progressive disease and the risk for spontaneous congestive heart failure is elevated going forward. Early pulmonary hypertension is noted, which is likely secondary to chronic LA pressure elevation. No additional issues are identified.



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Given these findings, it is reasonable to continue full cardiac support. An increased respiratory rate is noted in the history. If this is a consistent finding, a dose adjustment of Lasix may be warranted. Consider repeat CXR if any question.

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Canine

Prognosis is guarded to poor long-term, and patient will always be at risk for recurrent CHF, development of arrhythmias/LA tear, syncope and/or sudden death in the future.

BREED

Yorkie

Omega fatty acid supplementation and mild salt restriction remain recommended. Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes. Serial monitoring of SRRs is recommended as the best way to screen for progression towards CHF at home.

SEX

Male Neutered

Elective anesthesia is not advised.

AGE

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PLAN

Continue Lasix, Pimobendan, Benazepril and Spironolactone as prescribed. If RR is persistently elevated, consider CXR +/- a dose increase of Lasix.

Monitor renal values and BP every 3-4 months lifelong.

WEIGHT

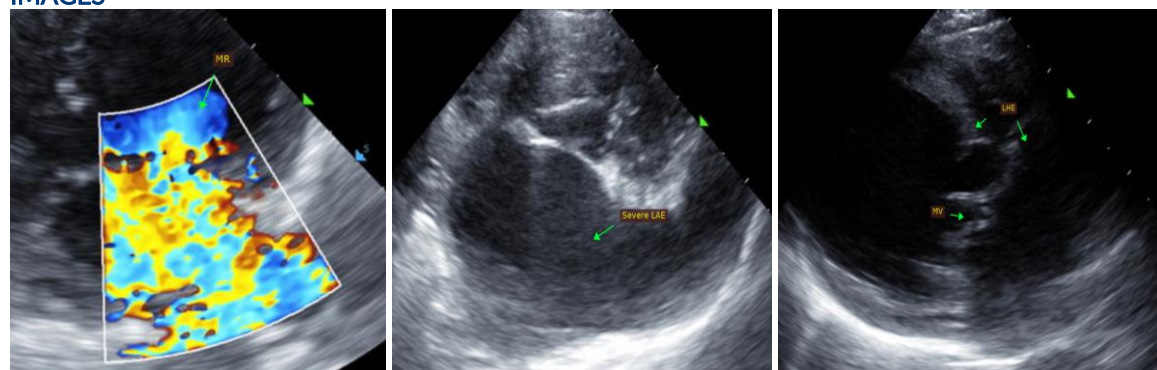
5.5lbs

Recommend conservative monitoring with a recheck echocardiogram in 6 months to screen for progression, sooner if clinical signs arise.

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IMAGES



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Dr. Turowsky

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.

INVOICE

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