


**PATIENT**

Preston Petricevic

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Weak with difficulty rising. Heart murmur.

-Current medications: Enalapril, Vetmedin, Furosemide.

-Pertinent previous echo findings, (1/2022 MD): DCM with severe LVE, moderate to severe LAE, moderate MR.

**SPECIES**

Canine

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. Severe left ventricular dilation with diminished systolic function. Decreased LV wall thickness with increased sphericity. Moderate left atrial enlargement. The mitral valve appears normal in form and function, with no obvious prolapse into the left atrial lumen. Moderate eccentric mitral regurgitation secondary to annular stretch. No significant tricuspid regurgitation. Mild right atrial and ventricular dilation. The aortic valve is normal in morphology and mobility. No subvalvular ridge present; normal LVOT velocity. No aortic insufficiency. Normal pulmonic valve with trace pulmonic insufficiency seen. Normal RVOT velocity. Atypical jet seen in the RVOT during systole; unknown significance. No pericardial or pleural effusion noted. No obvious cardiac tumors.

**BREED**

Pug

**SEX**

Male Neutered

**AGE**

11 years

**CARDIAC CHART**
**WEIGHT**

20.7lbs

**INTERPRETED BY**

 Maggie Machen Lamy,  
 DVM DACVIM  
 (Cardiology)

**IMAGING PERFORMED BY**

Kelly Reschny, RVT

**HOSPITAL NAME**

 Beattie Pet Hospital  
 Stoney Creek

**REFERRING VET**

Dr. Mellish

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	NM	1.6	1.7	5	10	0.16
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	1.7	1.6	9.4	3.0	4.1	3.9
*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)
*Note: All measurements based upon multi-modal images and methods. An average value is reported.				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**

Marked cardiomyopathy and dysfunction persists in this study. The previously reported fractional shortening is suspected to be an error, making it difficult to make a direct comparison; however, the current degree of dysfunction is marked. Moderate left atrial enlargement is somewhat surprising, although the risk for complication is extremely high regardless. No obvious additional issues are identified, such as pulmonary hypertension.

**INVOICE**

26532

**DATE**

9/23/22



## PATIENT

Preston Petricevic

Given the degree of LV failure, the current clinical signs are not unexpected. Lethargy and weakness may be exacerbated by hypotension and Enalapril should be discontinued. Dose ranges are suggested as below, although current dosages are not provided. Taurine should be supplemented, and diet history carefully assessed in this atypical signalment.

## SPECIES

Canine

Regardless of cause, prognosis is guarded to poor at this stage in the disease process, with an average survival time of <6 months. The only treatable cause of systolic failure is diet/taurine deficiency, which is uncommon on commercially formulated dog foods. If the diet is of concern, highly recommend immediate diet change and taurine supplement regardless of blood taurine results. Please see the FDA website for more information.

## BREED

Pug

## SEX

Male Neutered

Cases of systolic failure are at high risk for malignant tachyarrhythmias (such as VT or rapid AF) and sudden death, and this should be expressed to the owner. Activity restriction is advised, and a baseline ECG recommended.

## AGE

11 years

Elective anesthesia is not advised due to high risk for complications.

## WEIGHT

20.7lbs

Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit. Monitor for development of a cough, worsening labored breathing, abdominal distention, exercise intolerance or collapse episodes in the future. Monitoring of sleeping breathing rates at home is recommended to assess response to medications and recurrence of CHF in the future.

## INTERPRETED BY

Maggie Machen Lamy,  
DVM DACVIM  
(Cardiology)

## PLAN:

Baseline BP/ECG recommended. Discontinue ACE-I. Administer Lasix 1-2mg/kg PO q12h. Institute Spironolactone 1-2mg/kg PO q12h. Administer Pimobendan 0.3mg/kg PO q8h. Institute taurine 500-1000mg PO q12h. Diet history/change as discussed.

Monitor a renal panel and blood pressure every 3-4 months lifelong.

## IMAGING PERFORMED BY

Kelly Reschny, RVT

A recheck echocardiogram is recommended in 6 months to screen for progression, sooner if clinical issues arise in the interim.

## HOSPITAL NAME

Beattie Pet Hospital  
Stoney Creek

## REFERRING VET

Dr. Mellish

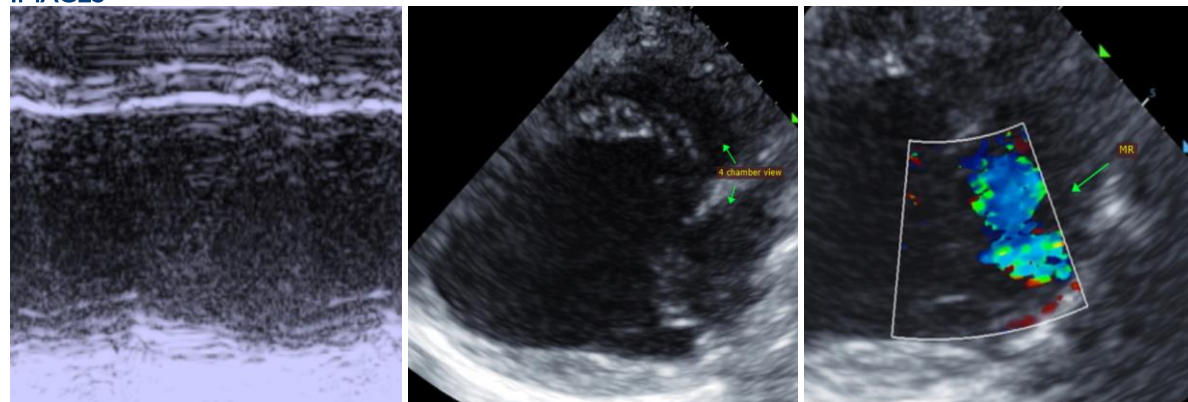
## INVOICE

26532

## DATE

9/23/22

## IMAGES





**PATIENT**

Preston Petricevic

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.

**SPECIES**

Canine

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.

**BREED**

Pug

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

**SEX**

Male Neutered

**AGE**

11 years

**WEIGHT**

20.7lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM DACVIM  
(Cardiology)

**IMAGING  
PERFORMED BY**

Kelly Reschny, RVT

**HOSPITAL NAME**

Beattie Pet Hospital  
Stoney Creek

**REFERRING VET**

Dr. Mellish

**INVOICE**

26532

**DATE**

9/23/22