

PATIENT PRESENTING CLINICAL SIGNS

PomPom Mahanujam History: elevated liver values and heart murmur heard. no other history from DVM
Abnormal PE/Chem/CBC/UA Results: n/a

SPECIES

Canine

BREED

Pomeranian

SEX

Female Spayed.

AGE

9

WEIGHT

5 kg

INTERPRETED BY

Camden Rouben DVM,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

St. George AH

REFERRING VET

Henin

INVOICE

22251

DATE

12-11-25

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (M-mode)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
PATIENT	5.15	1.0	1.46	1.49	39.05	73	0.1
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LAD LA MAX 4 Chamber	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				
PATIENT	--	2.0	1.18	5 kg	16.6 mm	1.68	1.03

Cardiac Presentation

The mitral valve leaflets are mildly thickened with mild mitral regurgitation posteriorly directed. There is mild prolapse of the mitral valve leaflets. The left atrial size is normal. The left ventricular internal dimensions during diastole are within normal limits and systolic function is preserved in the face of mitral regurgitation. There is normal right atrial size with very mild tricuspid regurgitation. There is no prolapse of the tricuspid valve leaflets. No evidence of significant pulmonary hypertension is noted. The right ventricle subjectively appears normal in structure and function. The aortic and pulmonic valves have normal morphology and the corresponding outflow velocities are within normal limits. There is no evidence of pulmonic or aortic insufficiency. The aorta appears normal. The pulmonary artery and associated branches appear normal. There is no evidence of pleural effusion, pericardial effusion, or intracardiac masses.

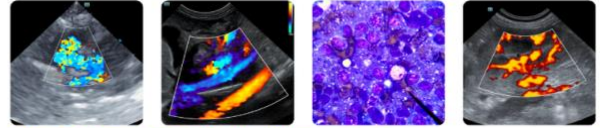
ULTRASONOGRAPHIC FINDINGS

Degenerative valve disease ACVIM Stage B1 with very mild tricuspid regurgitation (based upon the images provided)

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

No cardiac medications are indicated at this time. Blood pressure should be performed in this patient. Since this can be a progressive condition, serial monitoring is recommended. A recheck echocardiogram is recommended in 10-12 months. A sooner recheck is recommended if the patient develops cardiovascular clinical signs or the heart murmur is worsening in intensity.

Elective anesthetic procedures should be well tolerated. Activity restriction is not necessary in this particular patient. Standard perioperative fluids rates should be well tolerated. Medications like dexmedetomidine and any other alpha 2 agonists are best avoided. Ketamine is also best avoided. Anticholinergics can be used in the face of a clinically significant bradyarrhythmia.



PATIENT

PomPom Mahanujam

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.
Camden Rouben DVM, DACVIM (Cardiology)

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info@SonoPath.com

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