

PATIENT **PRESENTING CLINICAL SIGNS**
Zoe Katz
History: Grade 4/6 heart murmur.
BP: 203, 201, 169mmHg

SPECIES **RADIOGRAPHIC FINDINGS** *NOTE: Images submitted for supplemental cardiac information only.
Canine
Single lateral film included. Mild cardiomegaly. No obvious evidence of CHF.

ECHOCARDIOGRAM FINDINGS

BREED 2D, m-mode, color flow and doppler imaging is available. Mild diffuse thickening of mitral valve leaflets with mild prolapse into the left atrial lumen. Mild eccentric mitral regurgitation with mild left atrial dilation. Normal MR velocity. Normal LV diameter with adequate myocardial function. The tricuspid valve appears normal with mild 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 or pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

SEX Female Spayed

AGE
15 years

CARDIAC CHART

WEIGHT	CANINE CARDIAC PARAMETERS		MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
	7.3lbs	NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
	PATIENT	5.2	2.5	NM	1.4	60	92	0.13	
INTERPRETED BY	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)
	Maggie Machen Lamy, DVM, DACVIM (Cardiology)	NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
	PATIENT	140	1.5	0.7	3.3	1.7	1.8	0.7	
IMAGING PERFORMED BY	*Normal chamber parameters expressed as a mean value (SD)								
	Rebekah Jakum, CVT ARDMS/RVT	BODY WEIGHT DEPENDENT PARAMETERS		3 1.27 (5.3) 2.46 (2.46) 1.36 (5.5) 5 1.40 (4.5) 2.74 (5.2) 1.60 (4.7) 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)					
HOSPITAL NAME	Adapted from June Boon, Veterinary Echocardiography, 1998 Rishniw M and Hollis NE, J Vet Intern Med 2000; 14:429-435 Hansson et al, Vet Rad and Ultrasound 2002 Bonagura et al. Echocardiography: principles of interpretation, Vet Clin North Am 15:1177, 1995								
	Pocono Peak Veterinary Clinic								
REFERRING VET	NP								

INVOICE **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**
22976
Chronic degenerative valve disease causing mild mitral and tricuspid regurgitation. Lack of left atrial enlargement indicates the current risk for complication is low. The jet is oriented in a somewhat unusual direction; however, the disease remains mild. No concurrent issues such as systolic dysfunction or pulmonary hypertension are noted in this study.

DATE
3/8/22



PATIENT

Zoe Katz

In an asymptomatic dog with no significant left atrial enlargement, no cardiac medications are clearly indicated. Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit. Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

SPECIES

Canine

While elevated, the reported blood pressures are too variable to interpret. Ideally obtain serial measurements in a controlled, low stress environment and continue until the readings plateau within 5mmHg of variability for 3+ readings.

BREED

Shih Tzu

Anesthetic risk is considered mild. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.

SEX

Female Spayed

AGE

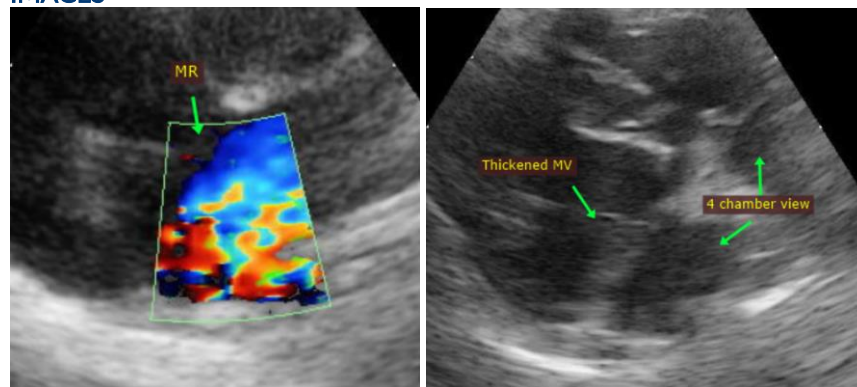
15 years

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

WEIGHT

7.3lbs

IMAGES



INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

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.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

Pocono Peak
Veterinary Clinic

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.

REFERRING VET

NP

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

INVOICE

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