


PATIENT

Maddie Cook

SPECIES

Canine

BREED

Italian Greyhound

SEX

Spayed Female

AGE

11 Years 2 Months

WEIGHT

26 Pounds

INTERPRETED BY

 Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Leon Anderson, DVM

HOSPITAL NAME

Elizabeth AH

REFERRING VET

Leon Anderson, DVM

INVOICE

16839

DATE

8/12/22

PRESENTING CLINICAL SIGNS

History: 6 MONTH FOLLOW-UP: We have been tracking Maddie's heart for a few years. Vetmedin was started in January (2.5mg bid) after chest x-rays revealed cardiac enlargement. She is on heartworm preventative. She has been clinically stable. SRR 14/min.

Abnormal PE/Chem/CBC/UA Results: PE: 3/6 SYSTOLIC HEART BASE MURMUR. STAGE III DENTAL DISEASE. REMAINDER NORMAL. NO RECENT LABS.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

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	<1.3	28-40	40-100	<0.6
PATIENT	6.0	3.0	1.5	2.16	41	72	0.1
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				
PATIENT	110	2.10	1.08	--	5.4	4.85	--

Cardiac Presentation

The cardiac presentation in this patient presented mitral and tricuspid insufficiency with early pulmonary hypertension. Left atrium and left ventricular dilation was noted. Contractility was adequate. Pericardial and pleural spaces were unremarkable. The right atrium and right ventricle were unremarkable. The pulmonary and aortic outflows were unremarkable. The left atrial size is significantly enlarged in this patient, along with the left ventricular dilation.

ULTRASONOGRAPHIC FINDINGS

- Mitral and tricuspid insufficiency
- Early pulmonary hypertension

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Even though the patient is not clinical, I recommend refining the current protocol and continuing Vetmedin and adding Ace-inhibitor at 0.5 mg/kg SID, progressing to BID and Spironolactone at 1-2 mg/kg BID. Recheck echo in 1-3 months.

The heart is in a somewhat precarious state with volume overload and a heart that is working to compensate for the valvular insufficiency. Target respiratory rate is < 20 resp/minute after therapy. After initiating therapy, I recommend recheck on the clinical exam, BUN, Creatinine, USG, Chest



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radiographs & Blood pressure in 5-7 days. Recheck echo in 1 month. Earlier if clinical decompensation is occurring. I do not recommend anesthesia at this time until stabilization has occurred on the recommended medications. Repeat preanesthetic echo is ideal if anesthesia is eventually necessary.

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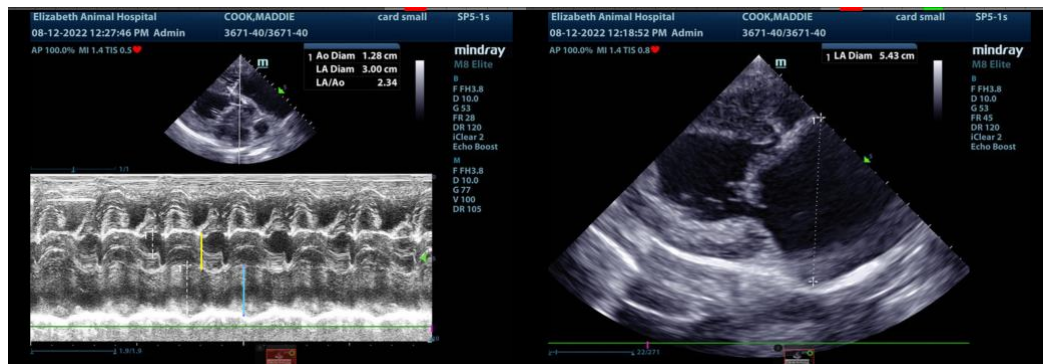
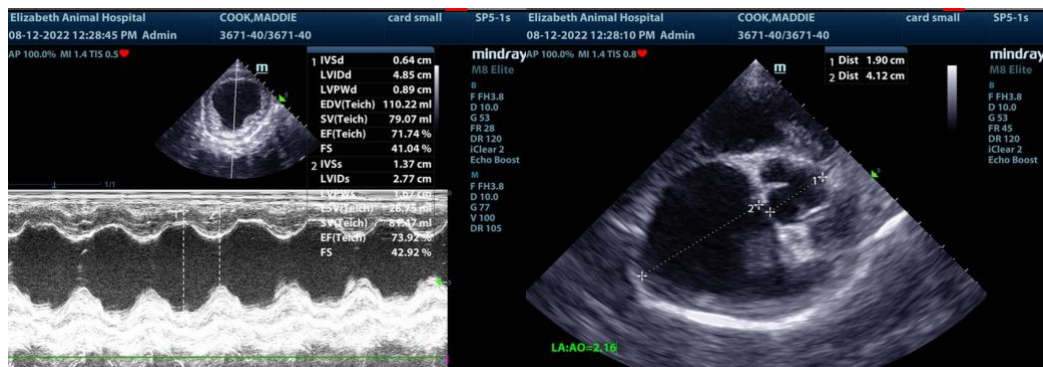
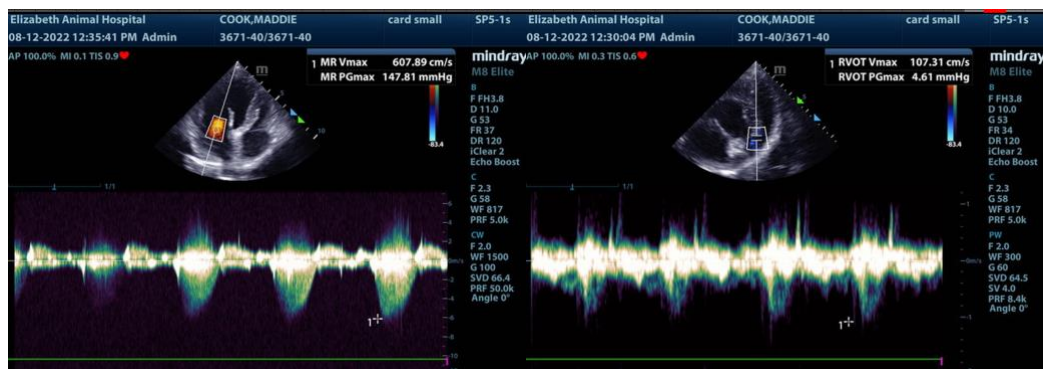
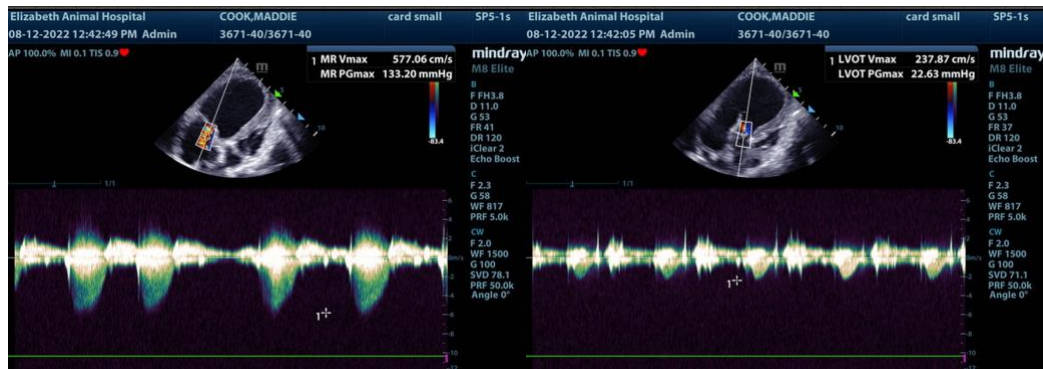
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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info@SonoPath.com

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