



PATIENT

- Mild TV insufficiency-no obvious clinical pulmonary hypertension

Skye Lopez

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

Canine

BREED

Weimaraner

The lack of LA enlargement indicates the current and future risk of complication secondary to MR is low. No evidence of right heart chamber or pulmonary artery enlargement in conjunction with lack of hepatic congestion which would suggest right-sided heart disease or clinical pulmonary hypertension. Given the cardiac presentation, the coughing in this patient appears non-cardiogenic in origin. No obvious indication for cardiac medication at this stage. However, the prognosis is highly variable and sonographic monitoring is advised. An ECG or Holter monitor is recommended to assess for potential paroxysmal arrhythmia given reported syncope. Respiratory support is indicated with clinical monitoring. Sonographic reassessment recommended in 6 months, sooner if clinically indicated.

SEX

FS

Current cardiac anesthetic risk is considered mild. If required, the following protocol is suggested. Suggested anesthetic protocol may include opioid or Benzodiazepine pre-med, induction with Propofol or Alfaxalone, and appropriate gas anesthesia with avoidance of alpha 2 agonists.

AGE

12yr

WEIGHT

76lb

INTERPRETED BY

R. McKenzie Daniel,
 DVM, DABVP
 (Canine and Feline)

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Flanders VC

REFERRING VET

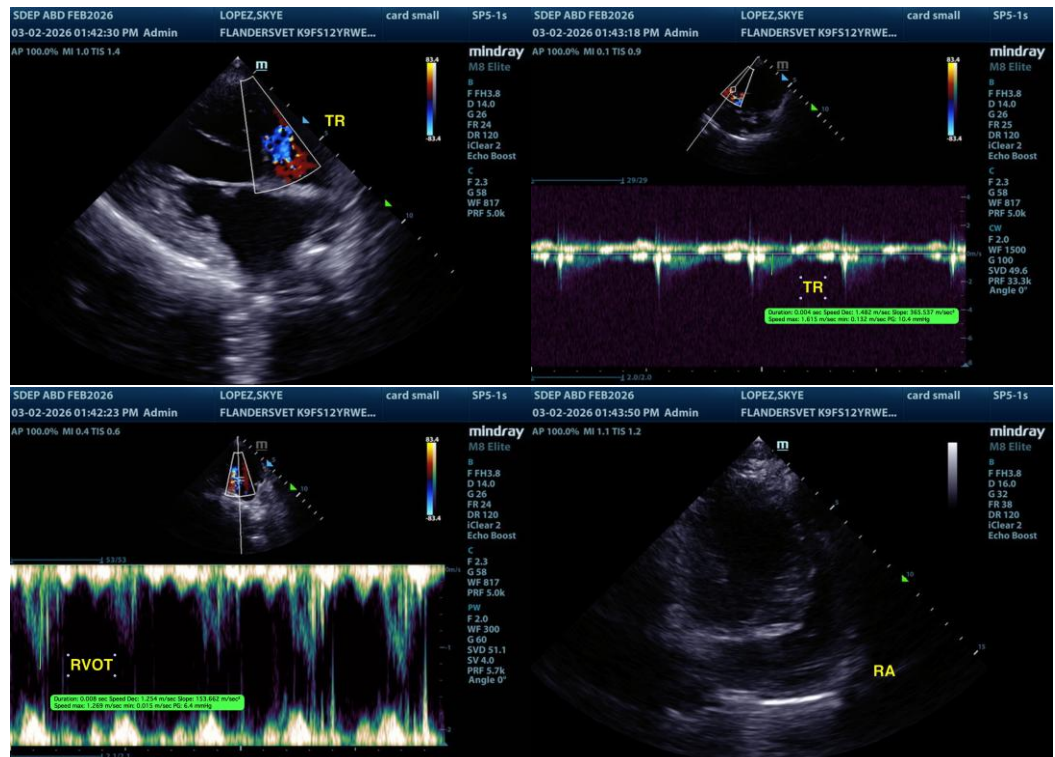
Dr Cheng

INVOICE

24073

DATE

03/02/2026





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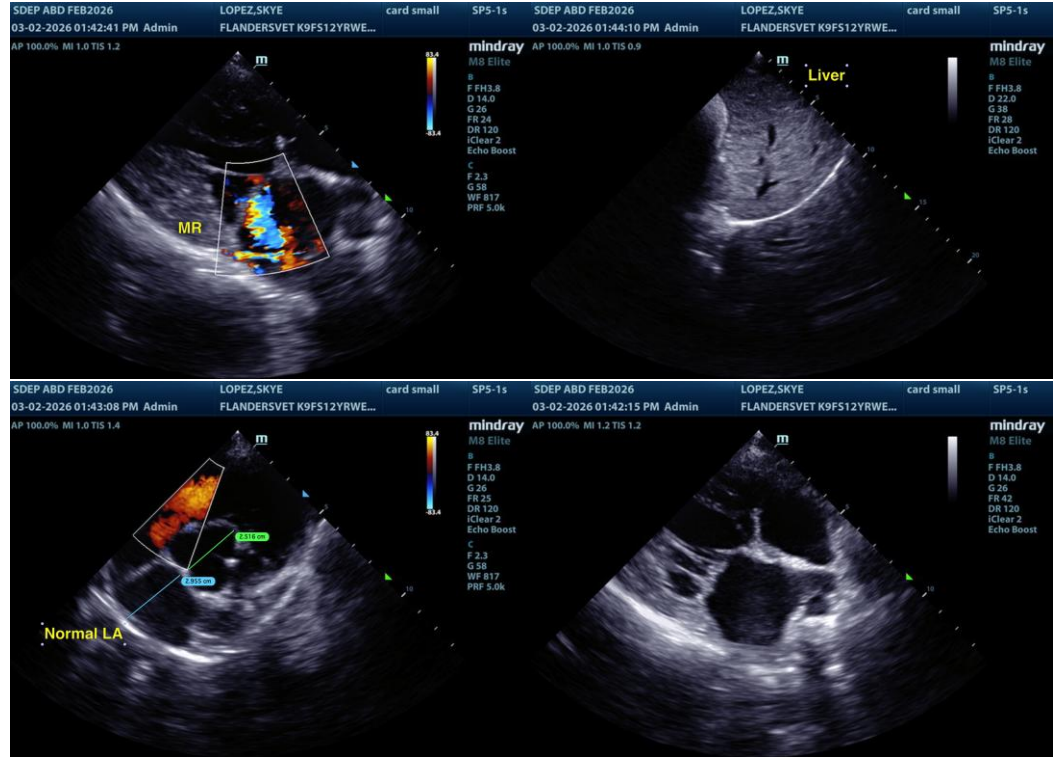
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

IMAGING PERFORMED BY

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 24073

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