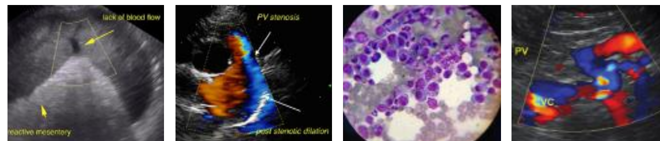


SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Macho Ferrell

SPECIES

Canine

BREED

Japanese Chin

SEX

MN

AGE

8 yr

WEIGHT

12 lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

New Bridge Veterinary Hospital

REFERRING VET

Dr. Glennon

INVOICE

11012ag

DATE

06/29/2022

PRESENTING CLINICAL SIGNS

HIstory: Recently adopted patient with history of cardiac disease/heart murmur presents for echo. Current meds: Enalapril, Pimo, and Furosemide (from Rescue). Blood work WNL. Hypertensive.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

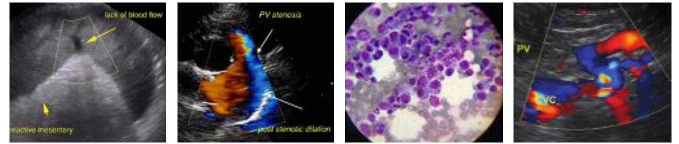
CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.3	28-40	40-100	<0.6
PATIENT				1.56	47.7	80.8	0.2
CANINE CARDIAC PARAMETERS	**HR** (BPM)	**AV VMAX** (m/s)	**PV MAX** (m/s)	**BODY WEIGHT** (kg)	**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	139	1.1	0.8		3.1	2.8	

Cardiac Presentation

The echocardiogram for this patient presented excessive left atrial size expressed both in the LA/AO and LA max measurements Chamber volumes and echogenicity were normal. The cranial and caudal mitral valve leaflets presented vegetative thickening consistent with endocardiosis. No evidence of valvular prolapse or chordae tendinea rupture was observed. Doppler indicated measurable eccentric insufficiency. The left ventricle presented thicknesses with linear contour and was not dilated nor restricted. The myocardium presented normal echogenicity without subjective evidence of significant fibrotic or ischemic disease. Contractility of the ventricular walls was adequate and in normal range for this patient evidenced by the fractional shortening measurement and subjective evaluation of the different regions of the myocardium. The left ventricular outflow tract demonstrated normal laminar flow and subjective structural integrity. The right atrium and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. Tricuspid valvular assessment demonstrated mild thickening with mild TR on Doppler. The right ventricle was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. Pulmonic tract assessment revealed normal valve structure, laminar flow, and diameter (approx.1:1 pa/ao ratio). No visible pericardial or free pleura fluid was noted. No echographically detectable evidence of infiltrative disease was visible. The cranial mediastinum and pericardial regions were free of masses in the visible window.

ULTRASONOGRAPHIC FINDINGS

- Chronic mitral valve disease (ACVIM early to mild B2)
- Mild TR



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Macho Ferrell

SPECIES
Canine

BREED
Japanese Chin

SEX
MN

AGE
8 yr

WEIGHT
12 lb

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

IMAGING PERFORMED BY
Kelly Vazquez

HOSPITAL NAME
New Bridge Veterinary Hospital

REFERRING VET
Dr. Glennon

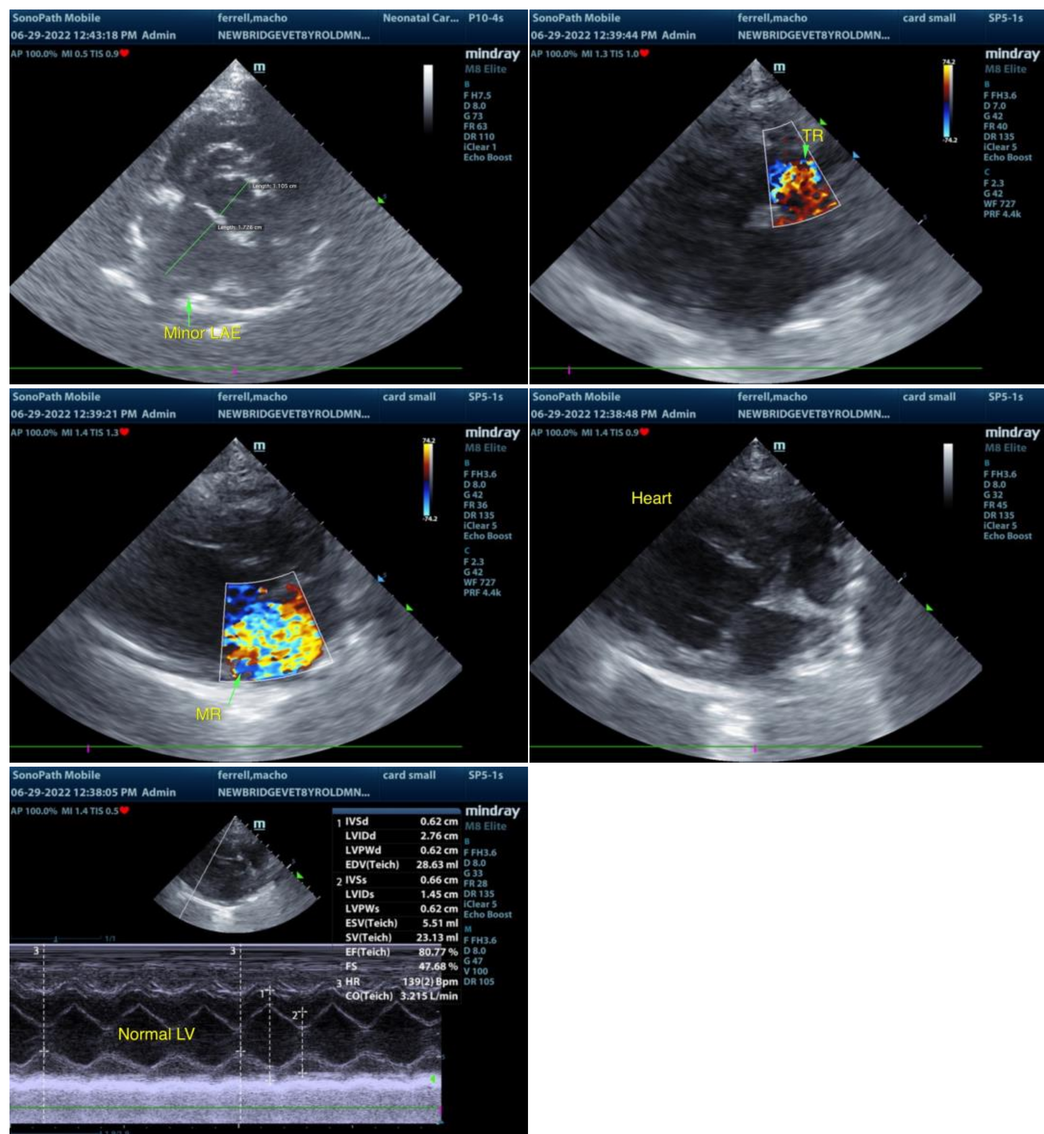
INVOICE
11012ag

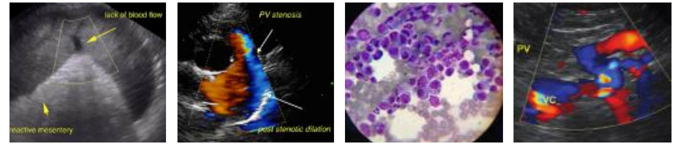
DATE
06/29/2022

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cause of the murmur is secondary to chronic degenerative valvular changes secondary eccentric mitral valve and mild tricuspid valve insufficiency. The minor LA enlargement may indicate that the risk for complication is relatively low however prognosis at this stage is highly variable. Continued Pimobendan would be reasonable given the minor LA enlargement and that this medication may help prolong cardiac changes associated with mitral valve insufficiency. No overt indication for diuretic therapy at this stage unless previous pulmonary edema or increased resting respiration rate are present. Continued ACE inhibitor therapy is warranted given the reported hypertension (BP >130, not advised if BP is <130). No overt anesthetic contraindications if required. Continued monitoring of the murmur and BP would be reasonable. Recheck echocardiogram suggested in 6 months sooner if clinical signs consistent with heart disease arise.

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.





SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Macho Ferrell

SPECIES

Canine

BREED

Japanese Chin

SEX

MN

AGE

8 yr

WEIGHT

12 lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

New Bridge Veterinary Hospital

REFERRING VET

Dr. Glennon

INVOICE

11012ag

DATE

06/29/2022

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com