

PATIENT PRESENTING CLINICAL SIGNS

Clayton Wosyluk History: New murmur - episode of "space out" and shake. Concern for syncopal episodes. 3-4/6 murmur
 Abnormal PE/Chem/CBC/UA Results: within normal limits

SPECIES

Canine

BREED

Maltese

SEX

Neutered Male

AGE

7

WEIGHT

8.4

INTERPRETED BY

Sara Brethel, DVM
 DACVIM

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	6.29	3.05	1.43	1.61	51.85	-	0.13
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	177	1.3	0.8	3.82	3.06	2.7	1.3

Cardiac Presentation

The mitral valve leaflets are moderately thickened with moderate mitral regurgitation posteriorly directed. There is moderate prolapse of the mitral valve leaflets. The left atrial size is moderately increased. Left ventricular internal dimensions during diastole are increased and systolic function is preserved in the face of mitral regurgitation. There is normal right atrial size with mild tricuspid regurgitation. There is no prolapse of the tricuspid valve leaflets and no evidence of pulmonary hypertension based upon tricuspid regurgitant velocities. 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.

IMAGING PERFORMED BY

Rebecca Hamilton

HOSPITAL NAME

Ringwood AH

REFERRING VET

Dr. Endu

INVOICE

22914

DATE

4-23-26

ULTRASONOGRAPHIC FINDINGS

- Degenerative valve disease ACVIM Stage B2
- Mild- to moderate left atrial enlargement
- Mild tricuspid regurgitation without evidence of significant pulmonary hypertension

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient has degenerative valve disease ACVIM stage B2 and pimobendan therapy at 0.27-0.32mg/kg PO q12 is recommended. This will be a lifelong therapy. A recheck echocardiogram is recommended in 4-6 months to monitor the condition since starting pimobendan. A sooner recheck is recommended if the



PATIENT

Clayton Wosyluk

patient develops cardiovascular clinical signs or the heart murmur is worsening in intensity. The client should start monitoring respiratory rate and effort at home if not already doing so. The resting respiratory rate should be < 35-40 breathes/minute when the patient is resting or sleeping. If the breathing rates are increasing then chest radiographs are recommended.

SPECIES

Canine

Recommend obtaining a blood pressure on the patient to ensure it is <160mmHg. If the blood pressure is elevated recommend following ACVIM guidelines for systemic hypertension and treating if indicated.

BREED

Maltese

The cause of the patient's episodes does not appear to be cardiac, despite mild enlargement identified. Aside from ensuring the patient is normotensive, recommend performing a full bloodwork. Can also consider performing an electrocardiogram +/- a Holter monitor to ensure no abnormalities are noted there. Can have the owners try and take a video of it for further clarification as well.

SEX

Neutered Male

AGE

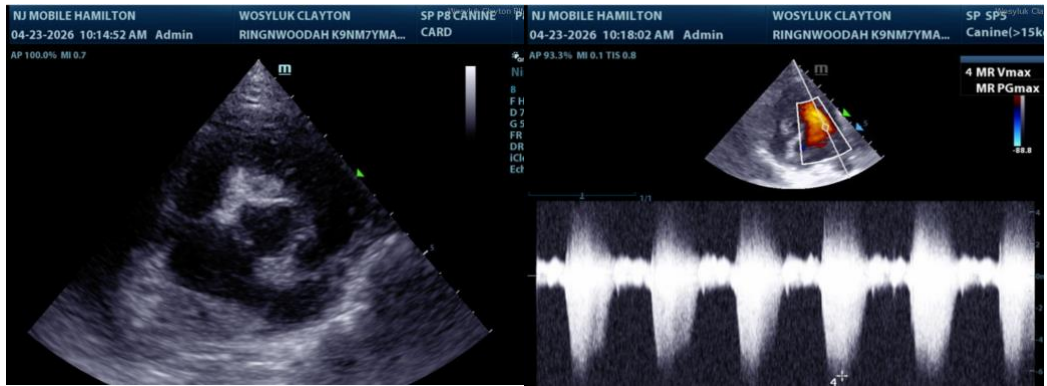
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

IMAGING PERFORMED BY

Rebecca Hamilton

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.
 Sara Brethel DVM, DACVIM (Cardiology)

HOSPITAL NAME

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