

Cardiology Report (23040293/Routine)

**Patient Name:** Stella Jones

**Requesting Doctor:** John Smith      **Species:** Canine      **Age:** 11y 0m  
**Gender:** Female/Spayed      **Breed:** Bulldog      **Weight:** 29 kg. / 64.0 lbs.

**General History**

*General*  
General Signs: **Weight Loss**  
*Other Signs*  
Genitourinary/Abdominal: **Urinary Tract Infection**

**Heart and Lung**

*Coughing*  
Coughing: **No**  
*Murmur*  
Murmur: **No**  
*Syncope*  
Syncope Detected: **Possible** Syncope Other: **disorientation**

**Lab Results**

*Bloodwork Normal*  
CBC: **Normal** Date Taken: **9/15/2008** Chemistry: **Normal**  
*BloodWork*  
Test Name: **Globulin** Result: **high**  
Test Name: **Monocytes** Result: **high**

**Radiographs**

*General*  
Taken: **Abnormal** Date Taken: **9/15/2008**  
*Cardiomegaly*  
CM Location: **Generalized**

**Medication**

Drug: **Clavamox**  
Drug: **Rimadyl**

**ECG Findings**

*Heart Rate* 130-140  
*Rhythm* Sinus with APCs  
*ECG Interpretation* Abnormal

**Overall Findings**

*ECG And Clinical Assessment:* Rate is normal. Rhythm is sinus with several APCs occurring singly and as couplets. Mean electrical axis and complexes when sinus complexes are normal. The frequency and severity of the recorded arrhythmia, however, is not expected to cause clinical signs. The arrhythmia may instead be the result of, along with reported disorientation, underlying neurological disease. Without a murmur, heart disease is unlikely for this aged pet.

*Diagnostic Recommendations:* Perform a complete neurological examination. Measure blood pressure. Because of the reported radiographic cardiomegaly, perform echocardiography. Abdominal ultrasound may be informative.

*Therapeutic Considerations:* Anti-arrhythmic therapy is not yet recommended. However, if the atrial arrhythmia significantly worsens, the patient may then benefit from diltiazem 30 mg PO q 8 h. Provide supportive care as needed.

**Requested By:**  
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**Report provided by:**  
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