

Healthy small- to medium-breed dogs with a heart murmur consistent with myxomatous mitral valve disease*

Measure NT-proBNP

NT-proBNP interpretation

< 500 pmol/L

500–1,200 pmol/L

> 1,200 pmol/L

**Stage B2
Unlikely**

**Stage B2
Possible**

**Stage B2
Likely**

Recheck NT-proBNP in
6–12 months time.

Consider further assessment,
including echocardiography,
thoracic radiographs, blood pressure
measurement, and SDMA/creatinine.[†]

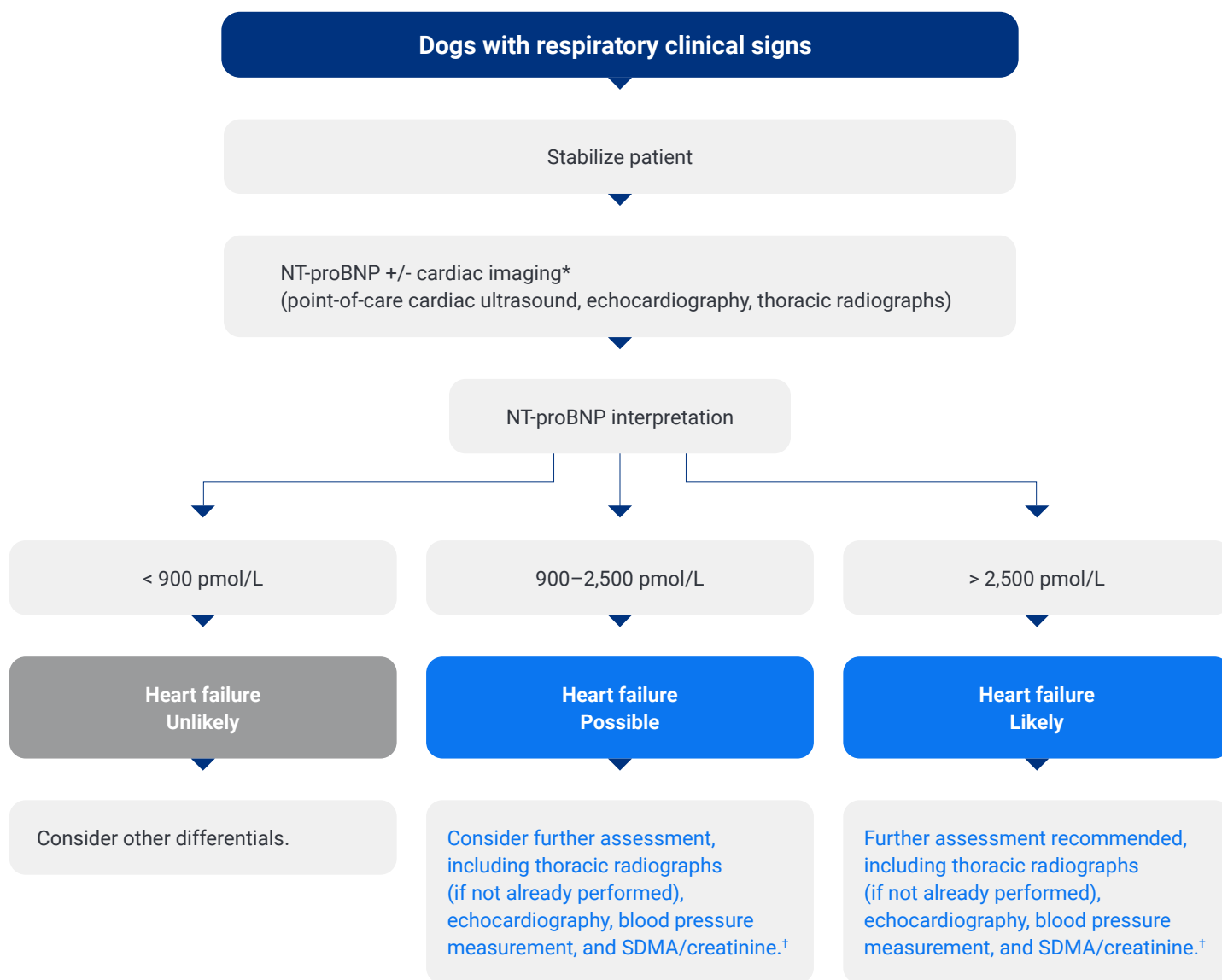
In dogs with a loud/thrill
murmur, further assessment
is recommended.

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including echocardiography,
thoracic radiographs, blood pressure
measurement, and SDMA/creatinine.[†]

In dogs with a loud/thrill
murmur, further assessment
is strongly recommended.

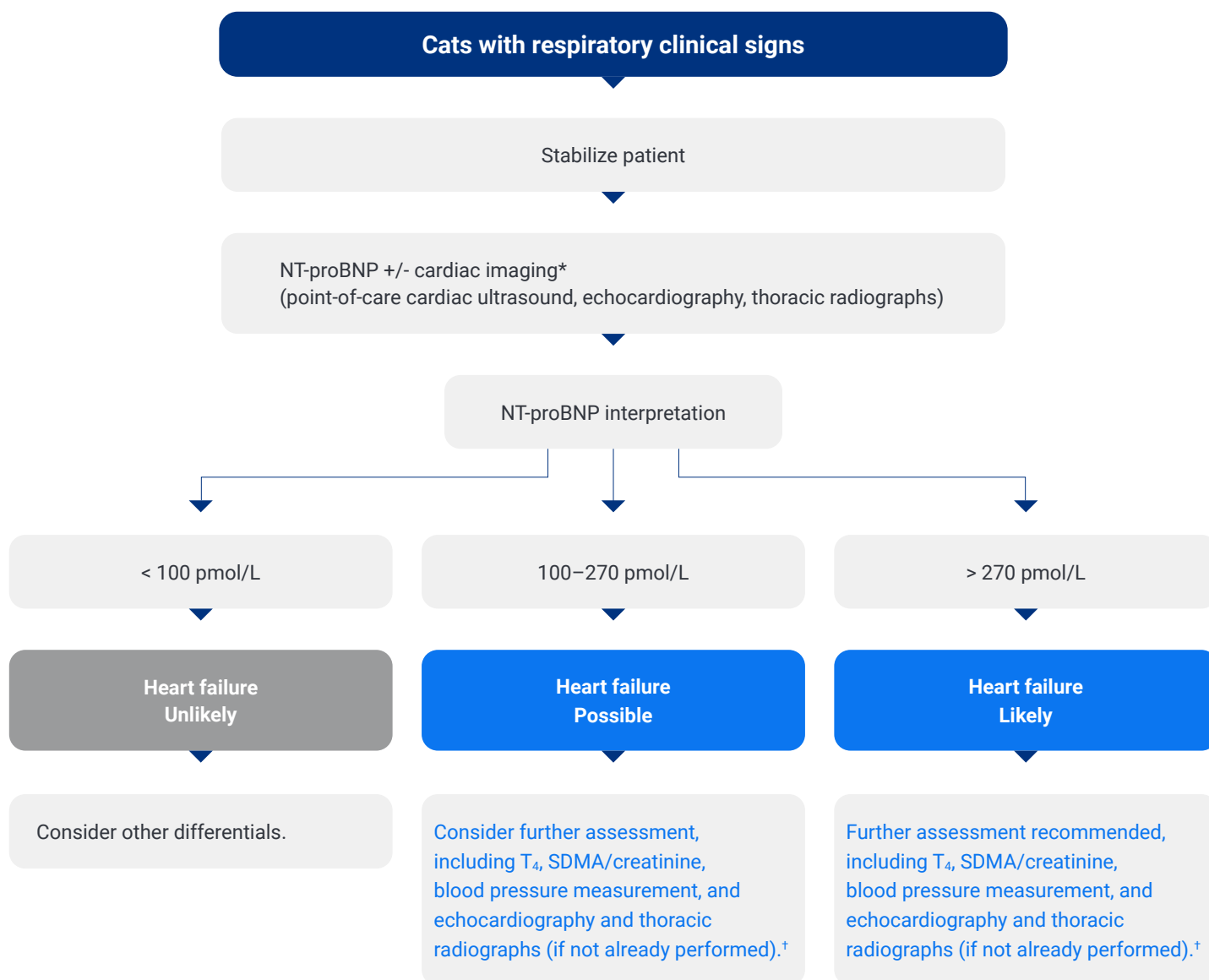
*Echocardiography is the gold-standard technique for the assessment of cardiac structure and function. Thoracic radiographs and measurements taken from them, including vertebral heart score (VHS) and vertebral left atrial size (VLAS), may provide information on heart size. Consider patient and client factors as part of a spectrum-of-care approach to diagnostic selection.

[†]Further assessment may include echocardiography, thoracic radiography, blood pressure assessment, CBC, biochemistry, electrocardiogram, infectious disease testing, urinalysis, and abdominal ultrasonography.



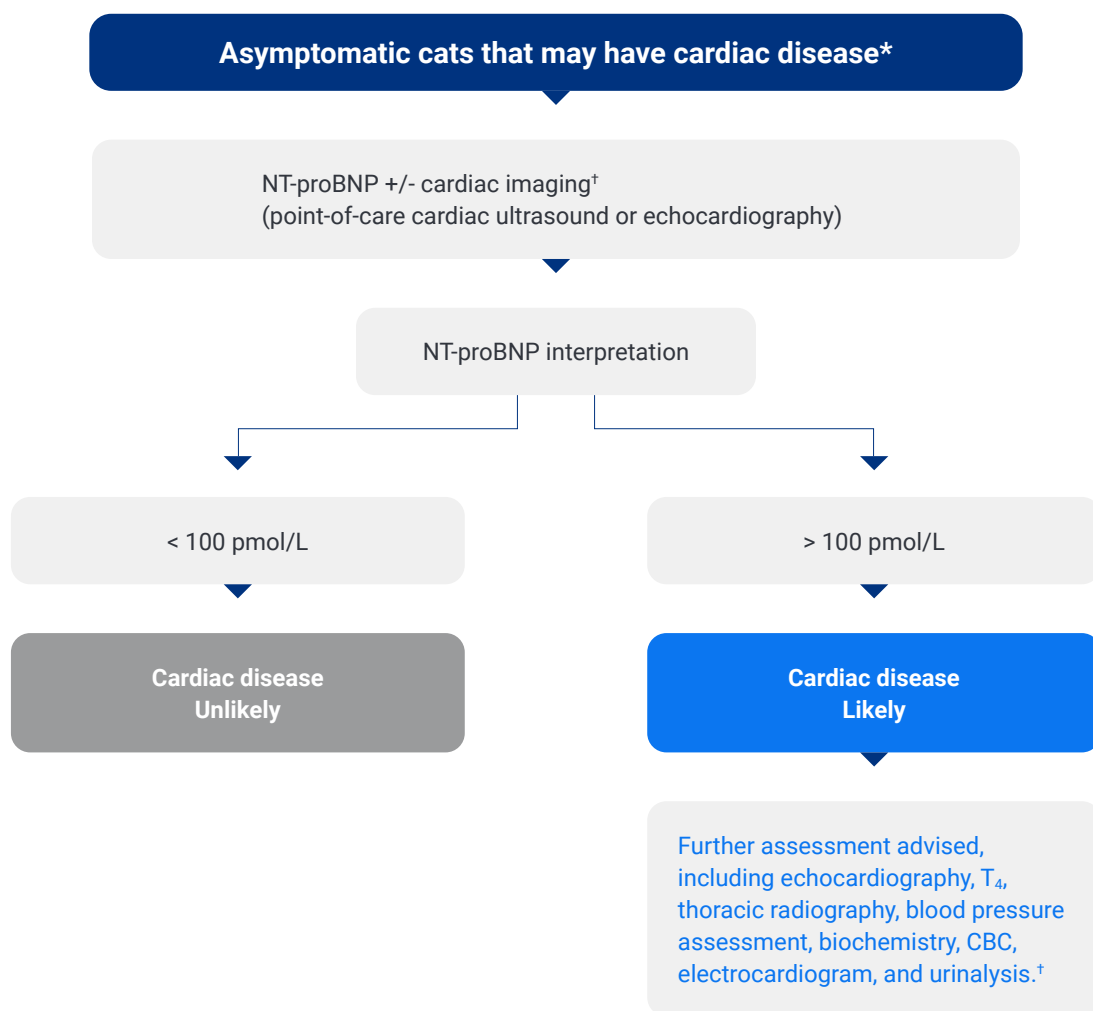
*Echocardiography is the gold-standard technique for the assessment of cardiac structure and function. Thoracic radiographs recommended for stabilized patients with dyspnea, tachypnea, and coughing. Consider patient and client factors as part of a spectrum-of-care approach to diagnostic selection.

†Further assessment may include thoracic radiography, echocardiography, blood pressure assessment, CBC, biochemistry, infectious disease testing, urinalysis, abdominal ultrasonography, and electrocardiogram.



*Echocardiography is the gold-standard technique for the assessment of cardiac structure and function. Cats with an increased left atrial size +/- ventricular hypertrophy detected by point-of-care cardiac ultrasound and a NT-proBNP result > 100 pmol/L are likely to have cardiac disease. Thoracic radiographs recommended for stabilized patients with dyspnea and tachypnea. Consider patient and client factors as part of a spectrum-of-care approach to diagnostic selection.

†Further assessment may include T₄, blood pressure assessment, echocardiography, thoracic radiography, CBC, biochemistry, electrocardiogram, and urinalysis.



*Asymptomatic cats that may be at an increased risk of cardiac disease include cats with a murmur, arrhythmia, or gallop sound detected on cardiac auscultation.

†Echocardiography is the gold-standard technique for the assessment of cardiac structure and function. Cats with an increased left atrial size +/- left ventricular hypertrophy detected by point-of-care cardiac ultrasound and a NT-proBNP result > 100 pmol/L are likely to have cardiac disease. Consider patient and client factors as part of a spectrum-of-care approach to diagnostic selection.