Supporting statistical analyses

	OR	<i>P</i> value
LA/Ao	0.30	< 0.0001
MR group		
mild vs. no	1.01	NS
mod-se vs. no	2.04	0.011
int vs. no	0.73	NS
Murmur group		
>0 vs. 0	1.69	NS
f vs. 0	1.99	0.023

Supporting Information Table 1.

There were significant differences between dogs that were included in statistical survival analysis and dogs lost to follow-up in the following variables: LA/Ao, ratio of left atrium to aortic root (LA/Ao), mitral regurgitation (MR) group and murmur group. Dogs with high LA/Ao had a significantly reduced odds ratio (OR) of being lost to follow-up. Compared with dogs with no MR, there was a significantly increased OR that dogs with moderate to severe MR were lost to follow up. Dogs with flow murmurs also had significantly increased OR of being lost to follow-up compared to dogs with no MR. MR group no=no (0%), mild=mild (<20%), mod-se= moderate-severe (20-100%), int=intermittent (most often mild MR but some MR jets \geq 20%); Murmur, mitral regurgitation murmur intensity group where 0=no murmur, >0=murmur 1-6, f=flow murmur.

	Interobserver CV% (range)	Intraobserver CV% (range)
LVIDD	2.6% (0.0;9.8)	1.1% (0.6;1.7)
LVIDS	3.6% (0.0;9.9)	1.3% (0.0;2.1)
LVPWD	5.9% (0.0;25.0)	3.0% (0.0;4.7)
FS	8.9% (0.0;42.1)	3.1% (1.5;3.9)
h/R	7.3% (0.0;31.6)	3.6% (1.2;5.3)
LA/Ao	5.7% (0.0;15.2)	2.5% (1.6;4.0)

Supporting Information Table 2.

Interobserver variability was assessed between two observers (MJR and LHO) performing assessments of 30 CKCS. For mitral valve prolapse (MVP) group, observers agreed in 23 of 30 dogs and in seven dogs MVP group differed by 1 group. For mitral regurgitation (MR) group the two observers agreed in 25 of 30 dogs and MR group differed by 1 group in three dogs, 2 groups in one dog and in one dog there was disagreement about the presence of intermittent MR.

Intraobserver variability was assessed on one observer (MJR) based on six repeated assessments in six CKCS. There was MVP group agreement in five of six dogs. In one dog, the MVP group differed by 1 in two of the six repeated assessments. MR group agreement was 100% in all six measurements of all six dogs.

CV%, coefficients of variation; FS, fractional shortening; h/R, diastolic LV posterior wall thickness relative to LV internal diastolic radius; LA/Ao, left atrial to aortic root ratio; LVIDD, left ventricular end diastolic diameter; LVIDS, left ventricular end systolic diameter; LVPWD, left ventricular free wall thickness in diastole.