

PATIENT

Luther Phillips

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11 y

WEIGHT

14.75 lb

INTERPRETED BY

Keith Blass, DVM, MS
DACVIM(Cardiology)

HOSPITAL NAME

Mass Veterinary
Specialty Services

REFERRING VET

Dr. Masloski

INVOICE

DATE

1/11/22

PRESENTING CLINICAL SIGNS

Grade III/VI sternal murmur. Pre-anesthetic evaluation (dental). Previous echo in May 2020 WNL. Occasional cough. Radiographs taken today consistent with asthma.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

Left atrial size is normal. The mitral valve is normal. Left ventricular wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic appear normal, though there is very mildly increased flow velocity in the ascending aorta. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.

LA/Ao - 1.28
 IVSd - 4.4 mm
 LVPWd - 4.2 mm
 LVIDd - 11.7 mm
 LVIDs - 5.7 mm
 FS - 51%
 LVOT - 1.51 m/s
 RVOT - 0.51 m/s

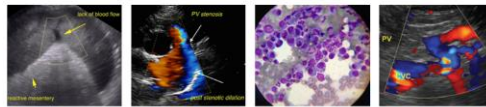
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Normal echocardiogram

This examination demonstrates no evidence of structural heart disease. Luther's murmur appears to be due to the presence of very mildly increased flow velocity in his aorta, which is a common reason for a functional/innocent murmur to develop in cats.

No therapy is recommended based on this exam, nor are there any contraindications to general anesthesia or steroid therapy.

A recheck echocardiogram is recommended if the characteristics of Luther's murmur change, or if other new physical exam and/or clinical abnormalities suggestive of cardiac dysfunction develop.



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The information and recommendations provided are based on the images presented by the referring veterinarian. 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.