



PATIENT

Freddie Morgan

SPECIES

Feline

BREED

Manx

SEX

Male Neutered

AGE

15 years

WEIGHT

8.5lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Wood River Animal
Hospital

REFERRING VET

Dr. Schuelke

INVOICE

28466

DATE

1/20/23

PRESENTING CLINICAL SIGNS

History: Presenting for new gallop rhythm and tachycardia (240 bpm). History of diabetes and acromegaly (possible pituitary tumor) and feline asthma managed on Fluticasone inhaler. On NOV R TID. Clinically doing well at home. Cardio pet ProBNP 1092. Current med: 1) Novolin R TID 2) Fluticasone inhaler PRN.

ELECTROCARDIOGRAPHIC FINDINGS *Note: Single lead ECGs are evaluated as a rhythm strip. Morphology/MEA cannot be definitively commented on.

A single lead ECG is available; 25mm/s, 20mm/mV. The underlying rhythm is sinus in origin with an average heart rate of 155bpm. P for every QRS complex and vice versa. P morphologies are positive. The QRS is inverted. Isolated VPCs are identified; polymorphic, singles only. A single APC is suspected. No pauses or dysrhythmias observed.

ECG diagnosis: Normal sinus rhythm with polymorphic VPCs and a single APC.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is mildly increased with significant depressed myocardial function. The LV wall thicknesses are normal in dimension with regions of apical thinning. There is a diffusely hyperechoic endocardium consistent with fibrosis. The papillary muscles are remodeled and asymmetric. The endocardium appears remodeled.

Left atrium: The left atrium is moderate to severely dilated with a horizontal component (auricular involvement). Smoke is visualized within the lumen. No obvious thrombi seen.

Mitral valve: The mitral valve is normal in structure and mobility. No obvious systolic anterior motion is seen. Trace central MR due to annular stretch.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.

Right ventricle: Mild right ventricular dilation.

Right atrium: The right atrium is moderately dilated.

Tricuspid valve: The tricuspid valve appears normal with mild tricuspid regurgitation.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

2-Dimensional Measurements

| | |
|--------------------|------|
| Ao diam (cm) | 1.0 |
| LA diam (cm) | 1.6 |
| LA:Ao (Swe) | 1.6 |
| IVS thickness (cm) | 0.39 |
| LVID diastole (cm) | 1.8 |
| PW thickness (cm) | 0.48 |
| LVID systole (cm) | 1.36 |
| FS (%) | 26 |

Doppler Measurements

| | |
|----------------|-----|
| PV Vmax (m/s) | 0.5 |
| AoV Vmax (m/s) | 0.7 |
| MR Vmax (m/s) | NA |
| TR Vmax (m/s) | NA |
| TR PG (mmHg) | NA |

INTERPRETATION OF THE FINDINGS

The finding of severe biatrial enlargement and LV dysfunction is most consistent with Restrictive Cardiomyopathy (RCM); however, end-stage HCM or DCM can also have this appearance. Severe biatrial dilation is present with smoke, which raises the risk of a blood clot event. No additional obvious issues are seen.



PATIENT

Freddie Morgan

SPECIES

Feline

BREED

Manx

SEX

Male Neutered

AGE

15 years

WEIGHT

8.5lbs

INTERPRETED BY

Maggie Machen
 Lamy, DVM
 DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan,
 RDCS

HOSPITAL NAME

Wood River Animal
 Hospital

REFERRING VET

Dr. Schuelke

INVOICE

28466

DATE

1/20/23

Regardless of categorical classification, this degree of atrial dilation confers high risk for spontaneous congestive heart failure and/or a blood clot event in the near future and institution of lifelong medications is suggested as below. Even without reported clinical signs, this patient is at high risk for decompensation. The long-term prognosis is guarded to poor even with medications and no reported symptoms; however, most cats are able to maintain a good quality of life for some time. There will always remain risk for progression to CHF, development of blood clots and/or sudden death in the future.

The ECG does confirm relatively frequent isolated ventricular premature contractions (VPCs). VPCs can certainly be cardiac in origin with significant structural disease, which is likely the case here. Polymorphism is noted, which is concerning as a marker of malignancy. No obvious indication for anti-arrhythmic therapy at this time. Close monitoring for any associated clinical signs including collapse or significant lethargy is advised with immediate re-evaluation in these instances.

RECOMMENDATIONS

- Institute low dose Lasix/furosemide 1mg/kg PO q12h.
- Institute blood thinner Clopidogrel (Plavix) 75mg tablets; give ¼ tab orally once daily (NOTE: this medication is very bitter on the cut edges).
- Institute Pimobendan (off label use) 1.25mg PO q12h.
- Elective anesthesia is not advised.
- Monitor for any clinical evidence of cardiac compromise, including respiratory changes and/or signs of a blood clot event (paralysis, neurologic changes, etc.).

PLAN

- Recheck renal panel, BP in 1-2 weeks to determine response to medication, then every 6 months lifelong.
- Recheck echocardiogram in 6 months, sooner if clinical signs arise

IMAGES





PATIENT

Freddie Morgan

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.

SPECIES

Feline

Thank you for this referral. This report was generated using transcription software, and minor dictation errors may be present. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

BREED

Manx

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

SEX

Male Neutered

Echocardiogram performed by: Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)

AGE

15 years

WEIGHT

8.5lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDCS

HOSPITAL NAME

Wood River Animal
Hospital

REFERRING VET

Dr. Schuelke

INVOICE

28466

DATE

1/20/23