



**PATIENT**

Finn Schroeder

**SPECIES**

Feline

**BREED**

Ragdoll

**SEX**

Male Neutered

**AGE**

5.5 years

**WEIGHT**

14.24lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

Joanne Goodman,  
DVM

**HOSPITAL NAME**

Evendale-Blue Ash Pet  
Hospital

**REFERRING VET**

Dr. Goodman

**INVOICE**

46555

**DATE**

1/23/26

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Grade 1-2/6 heart murmur. Doing well. BP: 167, 120mmHg.  
-Pertinent previous echo findings (4/2025 MML): Normal versus UCM with mild LAE; remainder NSF.  
LA: 1.5.

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

A brief single lead ECG is available; 25mm/s, 10mm/mV. The average heart rate is 166bpm. The rhythm is sinus in origin, with a p for every QRS complex and vice versa. The P and QRS morphologies are positive. No ectopic beats, pauses or other dysrhythmias observed. ECG diagnosis: Normal sinus rhythm with respiratory variation.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The LV is slightly dilated. There is a mildly hyperechoic endocardium consistent with fibrosis. The papillary muscles are mildly enlarged and hyperechoic. The endocardium also appears remodeled. The left atrium is mildly dilated. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility. No MR or TR. Blood flow through the LVOT and RVOT are normal in velocity. No pleural or pericardial effusion seen. No obvious cardiac tumors.

**CARDIAC CHART**

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	LVWd (cm) (Moise, Pipers)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	6.5	NM	0.52	1.75	0.53	44	80
FELINE CARDIAC PARAMETERS	LA/AO (Boon)	LA/AO HEART BASE (Swe) (Abbott)	LA 2D short axis Base view (cm) (Abbott)		LVOT VEL (m/s)	RVOT VEL (m/s)	E max (m/s)
NORMAL	<1.5	<1.3	<1.2		<1.6	<1.3	<0.9
PATIENT	NM	1.5	1.5		1.4	0.9	NM

\*Note: All measurements based upon multi-modal images and methods. An average value is reported.  
Adapted from June Boon, Veterinary Echocardiography, 1998  
Abbott J & MacLean H JVIM 2006;20: 111-119, Moise et al. Am J Vet Res 47:1476, 1986. Pipers et al. Am J Vet Res 40:882, 1979.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Compared to the prior study, findings are similar. The only difference is there is now slight LV dilation with a stable left atrium. The relevance of this is unknown and continued monitoring is advised. No additional issues have developed, and the ECG is unremarkable with a normal sinus rhythm.

Given these findings, no medications are indicated at this time. Monitor for any signs of progressive heart disease at home including change in breathing rate or effort, signs of a blood clot event and/or lethargy/syncope going forward.

Prognosis is guarded prior to assessing rate of progression.



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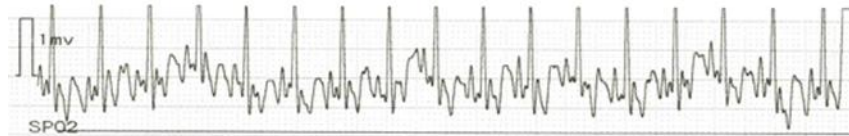
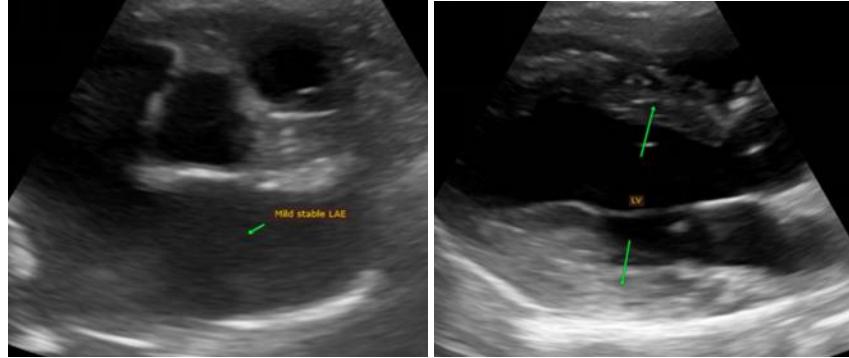
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A recheck echocardiogram is recommended in 6-12 months to screen for progressive LA dilation, sooner if a progressive murmur or signs of cardiac compromise are noted in the interim.

## IMAGES



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. 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.

Maggie Machen Lamy, DVM  
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