



PRESENTING CLINICAL SIGNS

DATE

1/26/23

History: Presented for evaluation of anemia. History of congenital sacrococcygeal dysgenesis and is urinary incontinent. Normal bloodwork in December. The past few days has been acting off and became pale. BW showed pancytopenia with a pronounced non-regenerative anemia (PCV 11%). Transfusion administered overnight, which increased PCV to 15%. Radiographs show generalized cardiomegaly. Sedated for exam with butorphanol and dexmedetomidine, and dexmedetomidine reversed 30 minutes later.

PERFORMED BY:

Tom McNeill

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve appears normal. Left ventricular wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Pluto Losse

LA - 14.9 mm
LA/Ao - 1.42
IVSd - 4.4 mm
LVPWd - 4.2 mm
LVIDd - 18.2 mm
LVIDs - 9.4 mm
FS - 48.3%
RA - 12.8 mm
LVOT - 1.22 m/s
RVOT - 0.89 m/s

SPECIES

Feline

BREED

Manx

ASSESSMENT/RECOMMENDATIONS

Normal echocardiogram

This examination demonstrates no evidence of structural heart disease. As such, the cardiomegaly noted in Pluto's radiographs is likely a normal variant.

SEX

No therapy is recommended based on this exam.

MN

A recheck echocardiogram is recommended if new physical exam and/or clinical abnormalities suggestive of cardiac dysfunction develop.

AGE

1 y

WEIGHT

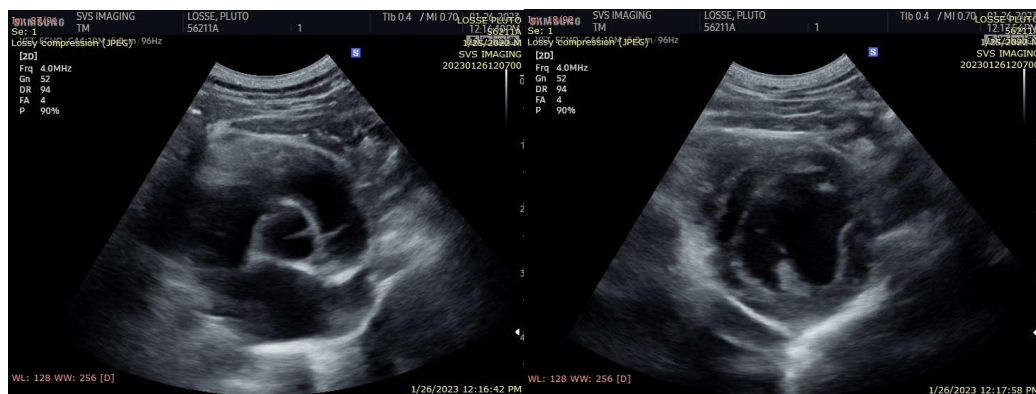
5.02 kg

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

Dr. McDaniel





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.

DATE

1/26/23

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.

PERFORMED BY:

Tom McNeill

Keith Blass, DVM, MS, DACVIM (Cardiology)
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