



## PATIENT

Beef Precop

## SPECIES

Feline

## BREED

DSH

## SEX

MN

## AGE

7 y

## WEIGHT

8.1 kg

## INTERPRETED BY

Keith Blass, DVM, MS,  
DACVIM (Cardiology)

## IMAGING PERFORMED BY

Dr. Iacovides

## HOSPITAL NAME

Tuxedo AH

## REFERRING VET

Dr. Bongiorno

## INVOICE

## DATE

1/5/26

## PRESENTING CLINICAL SIGNS

Radiographs showed cardiomegaly and possible pulmonary edema. No murmur. RR/RE normal. Started furosemide 5 mg BID three days ago.

## ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

There is moderate to severe left atrial dilation. Left auricular function is depressed, and spontaneous contrast is visible in the auricle. The mitral valve appears normal, though trace mitral regurgitation is present. There is mild left ventricular dilation. Left ventricular systolic function is mildly depressed, and is characterized by hypokinesis of the left ventricular posterior wall, with normal motion of the interventricular septum. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

An occasional arrhythmia is present.

LA – 23.6 mm  
LA/Ao – 2.39  
IVSd – 6.0 mm  
LVPWd – 4.4 mm  
LVIDd – 19.1 mm  
LVIDs – 12.5 mm  
FS – 34.6%  
RA – 11.9 mm  
LVOT – 1.20 m/s  
RVOT – 0.58 m/s

## ASSESSMENT/RECOMMENDATIONS

Hypertrophic cardiomyopathy (HCM)

This examination demonstrates mild hypertrophy of Beef's interventricular septum, consistent with the presence of HCM, as well as hypokinesis of his left ventricular posterior wall. Secondary to these abnormalities, Beef has moderate to severe dilation of his left atrium and mild dilation of his left ventricle. Given this, it comes as no surprise that Beef has experienced an episode of left-sided congestive heart failure. His current radiographs do show enlargement of his pulmonary vessels, as well as some bronchial markings, though no evidence of persistent pulmonary edema is seen. In addition to congestive heart failure, Beef is at high risk for thromboembolic disease, therefore, careful monitoring for the development of limb paresis/paralysis is recommended.

An intermittent ECG (likely premature beats) is appreciated during this exam, and an ECG is recommended for further evaluation.

Continued use of furosemide is warranted based on this exam, as is therapy with enalapril (2.5 mg BID), pimobendan (2.5 mg BID), and clopidogrel (18.75 mg SID).

A renal/electrolyte profile is recommended in 1 week. A recheck echocardiogram is recommended in 6 months. Repeat thoracic radiographs are recommended if Beef experiences difficulty breathing.



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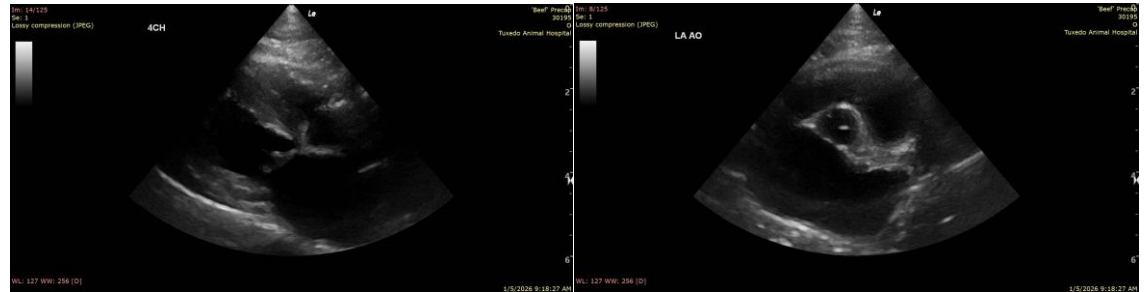
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Keith Blass, DVM, MS, DACVIM (Cardiology)

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