

PRESENTING CLINICAL SIGNS

History: Murmur. BP 165 mmHg.

DATE

1/6/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Dr. Kalenius

Left atrial size is normal. The mitral valve is normal. There is mild to moderate symmetrical left ventricular hypertrophy. Left ventricular internal dimensions are normal. Left ventricular systolic function is hyperdynamic. 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.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA – 15.2 mm
IVSd – 6.9 mm
LVPWd – 6.9 mm
LVIDd – 15.8 mm
LVIDs – 6.1 mm
FS – 61%
LVOT – 1.17 m/s
RVOT – 1.59 m/s

PATIENT

Tiger Crone

ASSESSMENT/RECOMMENDATIONS

Hypertrophic cardiomyopathy (HCM)

SPECIES

Feline

This examination demonstrates mild to moderate hypertrophy of Tiger’s left ventricular walls, consistent with HCM, though hyperthyroidism should be ruled out as a possible contributing factor (Tiger’s BP is unlikely to be elevated enough to be contributing). The hemodynamic effects of the hypertrophy appear to be relatively mild, as Tiger does not have secondary dilation of his left atrium, indicating that his current risk for the development of congestive heart failure and/or thromboembolic disease appears to be relatively low.

BREED

DSH

No therapy is recommended at this stage of disease.

SEX

A recheck echocardiogram is recommended in 6 months to monitor for disease progression. Thoracic radiographs are recommended if Tiger experiences respiratory clinical signs.

MN

AGE

15 y

WEIGHT

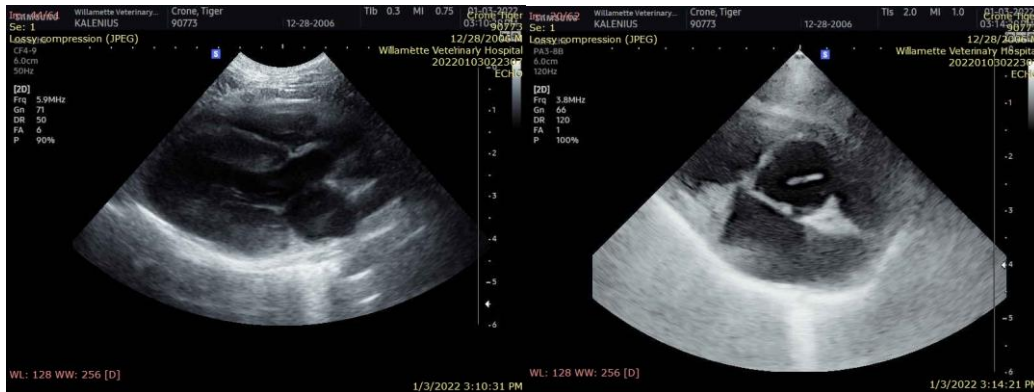
13.2 lb

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Kalenius



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.

DATE

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Keith Blass, DVM, MS, DACVIM (Cardiology)
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631-804-5754

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