



PATIENT

Whiskey Borrelli

PRESENTING CLINICAL SIGNS

History: Grade II-III/VI systolic murmur; no clinical signs. BP: 169, 170, 172mmHg

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

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

Left ventricle: The LV diameter is normal with adequate myocardial function. The LV wall thicknesses are normal. There is a mildly hyperechoic endocardium consistent with fibrosis.

BREED

DSH

Left atrium: The left atrium is normal in dimension. No obvious spontaneous contrast or thrombi seen.

SEX

Female Spayed

Mitral valve: The mitral valve is normal in structure and mobility. No obvious systolic anterior motion is seen.

AGE

15 years

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. No aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: The right atrium is normal in dimension.

WEIGHT

7.4lbs

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

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

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

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 130bpm.

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

2-Dimensional Measurements

Ao diam (cm)	1.0
LA diam (cm)	1.1
LA:Ao (Swe)	1.1
IVS thickness (cm)	0.36
LVID diastole (cm)	1.22
PW thickness (cm)	0.37
LVID systole (cm)	0.52
FS (%)	57

Doppler Measurements

PV Vmax (m/s)	0.4
AoV Vmax (m/s)	0.6
MR Vmax (m/s)	NA
TR Vmax (m/s)	1.7
TR PG (mmHg)	12

IMAGING

PERFORMED BY

Pamela Harrigan,
RDCS

INTERPRETATION OF THE FINDINGS

Essentially normal geriatric cardiac structure and function. The LV wall thickness is normal and there is no evidence of elevated left atrial pressure. Remodeling and fibrosis of the left ventricular wall is identified, which is considered normal in a senior cat. The only cause of a murmur identified is mild TR, which is typically a physiologic findings (i.e. benign and non-progressive). Monitoring is advised. Both atria are normal indicating low risk for complication at this time. Prognosis is open until progression is determined.

HOSPITAL NAME

Pine Banks Animal
Hospital

RECOMMENDATIONS

- Given these findings, no medications are indicated.
- No cardiac contraindication for general anesthesia. Mild IV fluid restriction is advised with monitoring of breathing rates at home while receiving iatrogenic fluids.
- Monitor for any clinical evidence of cardiac compromise, including respiratory changes and/or signs of a blood clot event (paralysis, neurologic changes, etc.).

REFERRING VET

Dr. Syed

INVOICE

28170

DATE

1/8/23



PATIENT

Whiskey Borrelli

PLAN

- Recommend recheck echocardiogram in 6-12 months to screen for any progressive changes, sooner if any issues arise in the interim.

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Female Spayed

AGE

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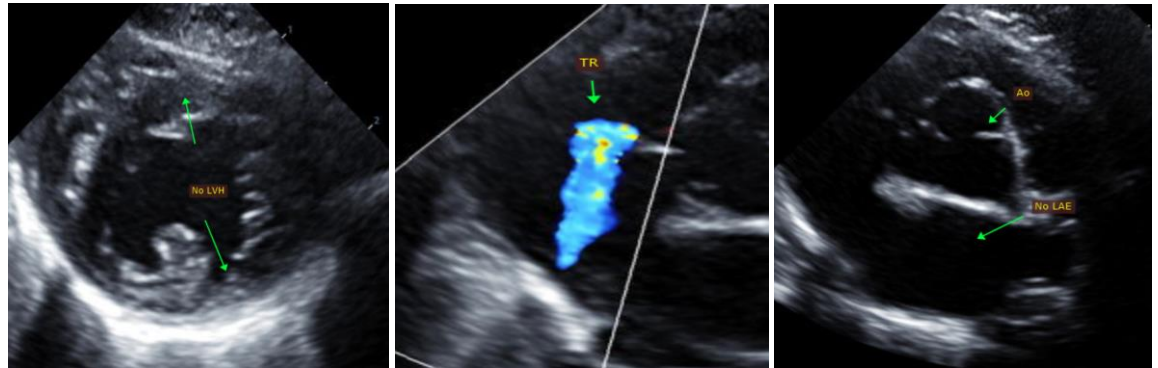
WEIGHT

7.4lbs

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Maggie Machen
 Lamy, DVM
 DACVIM (Cardiology)

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.

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 info@sonopath.com

IMAGING PERFORMED BY

Pamela Harrigan,
 RDMS

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