

**PATIENT**

Dipper Toner

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

8 years

**WEIGHT**

11lbs

**INTERPRETED BY**Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Elliott

**INVOICE**

21488

**DATE**

10/12/21

**PRESENTING CLINICAL SIGNS**

History: Assess prior to anesthesia. No murmur ausculted.

-ECG report: Shows left anterior fascicular block.

-Abnormal PE/Chem/CBC/UA Results: CBC WNL, ALB 2.5, TP 5.6

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is largely normal in dimension; however, the proximal aspect of the septum measures mildly increased.

There is a diffusely hyperechoic endocardium consistent with mild fibrosis. The endocardium also appears mildly remodeled. Mild papillary muscle remodeling. The left atrium is normal. The mitral valve is normal in structure and mobility. No MR. The right atrium is normal in size. The right ventricle appears normal. Mild TR. Normal velocity. Blood flow through both the LVOT and RVOT are normal in velocity. No obvious cardiac tumors identified. No effusions.

**CARDIAC CHART**

| FELINE CARDIAC PARAMETERS  | BODY WEIGHT (kg) | HR (BPM)                        | IVSd (cm) (Moise, Pipers)                | LVIDd (cm) (Moise, Pipers) | LWVd (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  | 5.0              | 195                             | 0.47                                     | 1.7                        | 0.47                      | 49             | 83          |
| 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  | 1.7              | 1.3                             | 1.32                                     |                            | 0.94                      | 0.94           | NM          |
| *Note: All measurements based upon multi-modal images and methods. An average value is reported.<br>Adapted from June Boon, Veterinary Echocardiography, 1998<br>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**

Overtly normal cardiac structure and function. There is fibrosis of the left ventricular wall and focal septal thickening which may be indicative of early cardiac disease or may simply represent a normal variant in this middle-aged cat. Regardless, the LA remains normal which would indicate clinical stability. Serial echocardiography will be necessary to determine progression.

Anesthetic risk is mild, however any cat with this degree of fibrosis and diastolic dysfunction will be at risk for IV fluid overload. Careful monitoring of breathing rates during and after administration is advised. Avoid heart rate stimulating drugs unless clinically indicated. No cardiac specific medications are indicated. Monitor for any development of clinical signs, including labored breathing or signs of a blood clot (paralysis, neurologic change).

A recheck echocardiogram is recommended in 12 months to screen for any evidence of progression, sooner if clinical signs develop.

IMAGING PERFORMED BY

svsmobileimaging.com 309 - 737 - 3070



**SonoPath**

Clinical Sonography & Telecytology

EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

**PATIENT**

Dipper Toner

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

8 years

**WEIGHT**

11lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Elliott

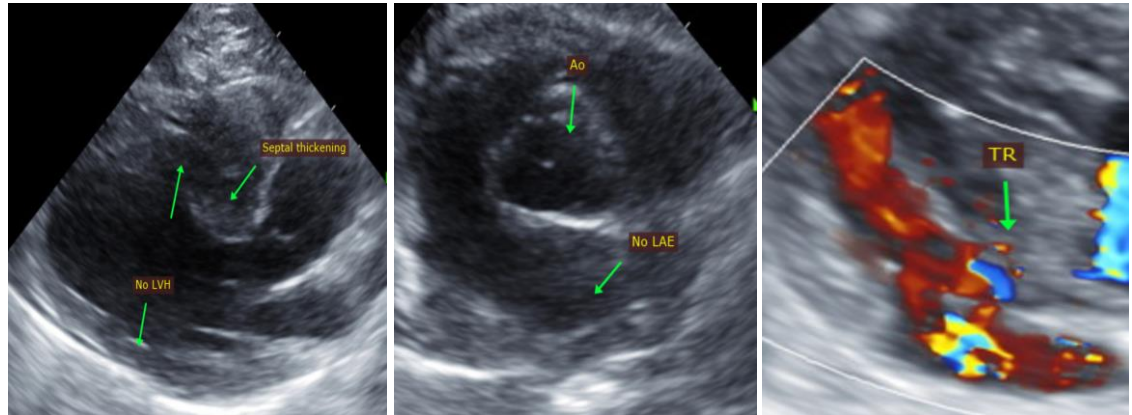
**INVOICE**

21488

**DATE**

10/12/21

**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. 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  
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)  
info@sonopath.com