


PATIENT

Swee Pea Banks

SPECIES

Feline

BREED

DSH

SEX

Female Spayed

AGE

17 years

WEIGHT

12lbs; 5.4kgs

INTERPRETED BY

 Maggie Machen Lamy,
 DVM, DACVIM
 (Cardiology)

IMAGING PERFORMED BY

 Loetitia St-Jacques,
 LVT/RVT

HOSPITAL NAME

 VCA Feline Animal
 Hospital

REFERRING VET

Dr. Fleming

INVOICE

21434

DATE

10/12/21

PRESENTING CLINICAL SIGNS

History: Recheck echo. Grade 2/6 heart murmur parasternal static to prior. Patient has recent seizure; previous one was four months ago and the one prior to that one year prior. Never had seizure activity before starting cardiac medications. Seemed to last up to four minutes in duration, had postdromal period where circling to the right, intermittent twitching. No subsequent seizure activity appreciated. RRR generally static at ~ 28 bpm

-Current medications: Cerenia 4mg PO q24, Pimobendan 1.25/2mg q12, Prednisone 2.5mg q72.
 -Abnormal lab results: Thyroid hormones - T4 = 2.5; CBC - Unremarkable; Urinalysis - USG 1.039 protein 1+ occult blood 1+ RB C2-3 else unremarkable; Chemistry profile - PSL 29 else unremarkable
ASSESSMENTS Seizure, Hyperthyroidism, Pancreatitis, Chronic, Active No etiology seizure activity, mild chronic active pancreatitis suspected given mild elevation PSL.

-Pertinent previous echo findings (6/2020 MML): Borderline LVH, moderate LAE, mild RAE, scant PCE. IVSd: 0.55, LVWd: 0.59, LA: 1.6.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is borderline normal in dimension. There is a diffusely hyperechoic endocardium consistent with fibrosis. False tendon. The papillary muscles are mildly remodeled. The left atrium is normal. The right atrium is normal. The right ventricle is normal. The mitral valve is mildly thickened with no MR. Blood flow through both the LVOT and RVOT is normal in velocity. No TR. No pericardial effusion seen. No pleural effusion. No obvious cardiac tumors.

CARDIAC CHART

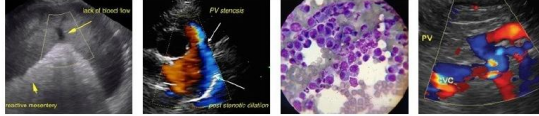
| FELINE CARDIAC PARAMETERS | BODY WEIGHT (kg) | HR (BPM) | IVSd (cm) (Moise, Pipers) | LVIDd (cm) (Moise, Pipers) | LVWd (cm) (Moise, Pipers) | FS (%) | EF (%) |
|---------------------------|------------------|---------------------------------|--|----------------------------|---------------------------|-------------|--------|
| NORMAL PARAMETER | ----- | 150-240 | 0.35-0.55 | <2 (mean 1.5) | 3.5-0.55 | 35-67 | 80-100 |
| PATIENT | 5.4 | NM | 0.59 | 1.3 | 0.59 | 50 | 85 |
| 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 | NM | 1.3 | 1.2 | 0.8 | 0.8 | NM | |

**Note: All measurements based upon multi-modal images and methods. An average value is reported.*
 Adapted from June Boon, Veterinary Echocardiography, 1998
 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

Compared to the prior study there is evidence of stability and mild improvement. The LV appears similar; however, the LA/RA enlargement is no longer present and the PCE has resolved. This would suggest a non-cardiac origin of the prior PCE and no additional issues are identified.

Given these findings, seizure-like activities are certainly non-cardiac in origin. Additionally, this is unlikely to be related to Pimobendan therapy. Consider primary neurologic causes more likely.



PATIENT

Swee Pea Banks

Reasonable to continue Pimobendan going forward, given improvement since the prior study. Prognosis is open long-term.

SPECIES

Feline

Patient will always be at risk for CHF and/or development of blood clots in the future. Monitoring of sleeping respiratory rates (SRRs) at home is recommended as the best way to screen for recurrent CHF at home.

BREED

DSH

PLAN

Continue Pimobendan as prescribed.

SEX

Female Spayed

A recheck echocardiogram is recommended in 1 year to screen for any progressive changes, sooner if any clinical signs arise.

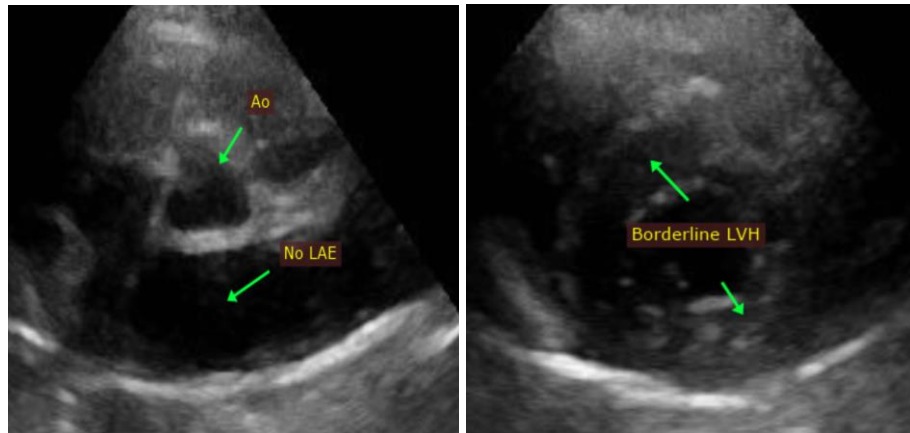
AGE

17 years

IMAGES

WEIGHT

12lbs; 5.4kgs



INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

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.

IMAGING PERFORMED BY

Loetitia St-Jacques,
LVT/RVT

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.

HOSPITAL NAME

VCA Feline Animal
Hospital

Maggie Machen Lamy, DVM

Diplomate of the American College of Veterinary Internal Medicine (Cardiology)

info@sonopath.com

REFERRING VET

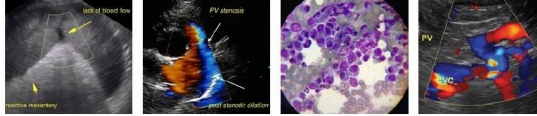
Dr. Fleming

INVOICE

21434

DATE

10/12/21



Portable Animal Western Sonography, Inc.

IMAGING PERFORMED BY
pawsonography@gmail.com  530-786-8340

PATIENT

Swee Pea Banks

SPECIES

Feline

BREED

DSH

SEX

Female Spayed

AGE

17 years

WEIGHT

12lbs; 5.4kgs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

**IMAGING
PERFORMED BY**

Loetitia St-Jacques,
LVT/RVT

HOSPITAL NAME

VCA Feline Animal
Hospital

REFERRING VET

Dr. Fleming

INVOICE

21434

DATE

10/12/21