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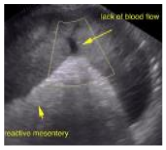
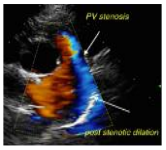
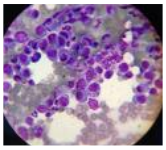
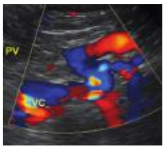
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

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

PATIENT
Claire Todd

SPECIES
Feline

BREED
DSH

SEX
Female Intact

AGE
5 months

WEIGHT
5lbs

INTERPRETED BY
Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY
Amanda Crook, SDEP

HOSPITAL NAME
Rivers Edge Pet Medical Center

REFERRING VET
Dr. Gray

INVOICE
21606

DATE
10/19/21

PRESENTING CLINICAL SIGNS

History: Grade II/VI heart murmur, systolic parasternal. No clinical signs reported.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is minimally hypertrophied with regions of irregularity. There is a diffusely hyperechoic endocardium consistent with fibrosis and mild ventricular remodeling. The right ventricle is normal. There is no left atrial enlargement present. No right atrial enlargement present. Normal RVOT velocity. Abnormal anterior motion of the mitral valve is seen, causing an elevated LVOT velocity on color flow and Spectral Doppler. The anterior leaflet of the MV is mildly thickened, consistent with dysplasia. There is moderate eccentric secondary mitral regurgitation present. Trace TR. No other obvious valvular regurgitation is present. There is no pericardial effusion noted. No pleural effusion appreciated.

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	2.3	NM	0.54	1.2	0.56	60	94
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	1.2	1.1		>4.0	1.0	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

The cause of the murmur is mitral valve dysplasia leading to an obstructive LVOT flow pattern and secondary moderate mitral regurgitation. There is no left atrial dilation or significant LV hypertrophy (mild appreciated), indicating the risk of spontaneous CHF and/or a thrombotic event is currently low.

While no medications have been shown to definitively alter long term outcome at this stage of disease, atenolol is often initiated to decrease the outflow obstruction. In cases of solely primary MV dysplasia this can lead to improvement in the degree of obstruction and hypertrophy. Given the mild nature of disease without LVH or LAE it is reasonable to revisit in the future and assess for progression prior to utilizing medications, particularly given the young age of the patient and lack of clinical signs.

Monitor at home for any respiratory signs or evidence of blood clot events (neurologic change, paralysis, etc.).

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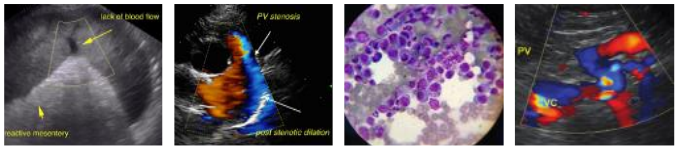

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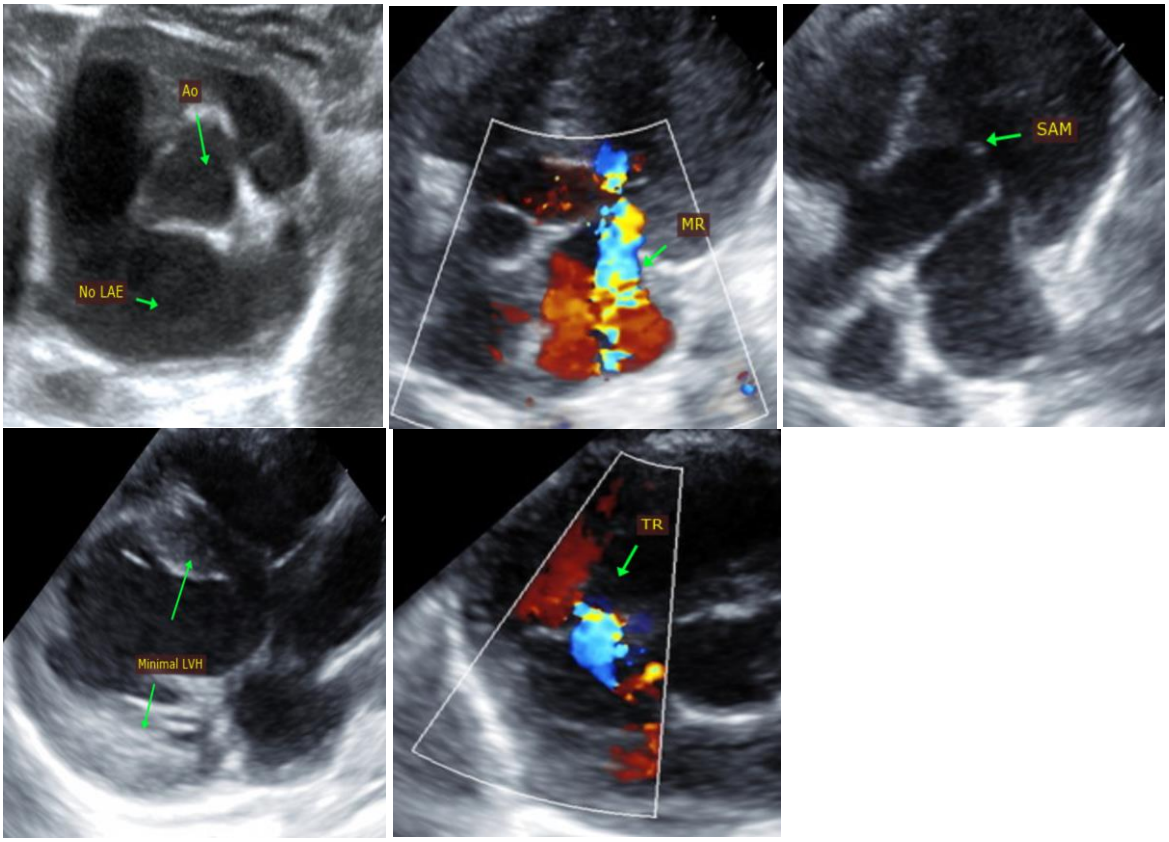
Long term prognosis is guarded given the age of the patient and highly variable nature of asymptomatic feline heart disease. Many cats will remain asymptomatic until mid-life or beyond. Close monitoring for progression of LA dilation in the future will help determine long term prognosis.

Recommend recheck echocardiogram at 1 year of age to screen for progression and need for Atenolol therapy.

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.

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com