


PRESENTING CLINICAL SIGNS

History: New arrhythmia ausculted during pre-operative exam (COHAT). Grade 3-4/6 murmur.
 Previous echo in March 2019 WNL.

DATE

10/20/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Tom McNeill

Left atrial size is normal. The mitral valve is normal. Left ventricular wall thickness is normal. 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 pericardial effusion or cardiac masses are seen.

INTERPRETED BY

Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

LA - 14.0 mm
 LA/Ao - 1.42
 IVSd - 4.7 mm
 LVPWd - 4.7 mm
 LVIDd - 9.1 mm
 LVIDd - 3.6 mm
 FS - 60%
 RA - 9.8 mm
 LVOT - 0.83 m/s
 RVOT - 1.28 m/s

PATIENT

Morty Lasater

SPECIES

Feline

ELECTROCARDIOGRAPHIC FINDINGS

A single lead ECG is submitted for review.

HR: 250 bpm
 Rhythm: Sinus

BREED

DSH

Sinus tachycardia is present throughout this recording. There are intermittent QRS complexes that have a decreased amplitude, however, they appear to be sinus in origin. All complex intervals are within normal limits. No premature beats or conduction blocks are seen.

SEX
ASSESSMENT/RECOMMENDATIONS

Normal echocardiogram

MN

This examination demonstrates no evidence of structural heart disease.

AGE

9 y

No evidence of an arrhythmia is appreciated in Morty's ECG, however, the two submitted strips are very short and it's possible that he could be experiencing intermittent premature beats that were not captured in the recordings.

WEIGHT

8.69 lb

Given the possibility of premature beats being present, I recommend avoiding the use of alpha-2 agonists, ketamine, telazol, and, if possible, anticholinergics in the anesthetic protocol as a precaution. Careful monitoring of Morty's heart rhythm is recommended during the procedure.

No therapy is recommended based on these exams.

HOSPITAL NAME

SVS Imaging CT

A recheck ECG is recommended in 1 month to reevaluate for the presence of an arrhythmia. A recheck echocardiogram is recommended if new physical exam and/or clinical abnormalities suggestive of the presence of structural heart disease develop.

REFERRING VET

Dr. Metzger



DATE

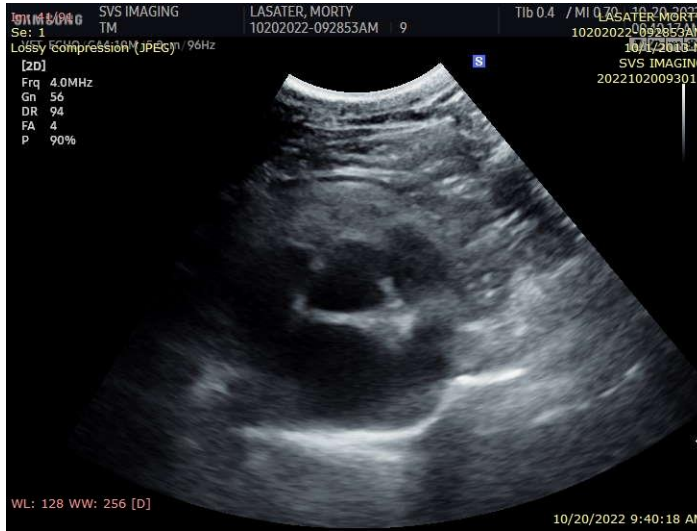
10/20/22

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PATIENT

Morty Lasater

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.

SPECIES

Feline

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.

BREED

DSH

Keith Blass, DVM, MS, DACVIM (Cardiology)
KeithBlass@gmail.com
631-804-5754

SEX

MN

AGE

9 y

WEIGHT

8.69 lb

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