



## PATIENT

Pierre Blitz

## PRESENTING CLINICAL SIGNS

History: Grade 2-3/6 heart murmur. Assess prior to dental. Radiographs: NSF.

## SPECIES

Feline

## ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is irregular with borderline dimensions overall. There is a hyperechoic endocardium consistent with fibrosis. The papillary muscles are mildly remodeled and hyperechoic. The left atrium is normal in size. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility. No MR. Trace TR. Blood flow through both the LVOT and RVOT is normal in velocity. No pleural or pericardial effusion seen. No obvious cardiac tumors.

## BREED

DSH

## CARDIAC CHART

### SEX

Male Neutered

### AGE

10 years

### WEIGHT

14.8lbs

### INTERPRETED BY

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

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	6.7	NM	0.57	1.1	0.54	66	95
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	1.1	1.1	1.1		0.8	0.95	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.

### IMAGING PERFORMED BY

Jessica Bailes

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Borderline LV dimensions are noted, which may be indicative of early hypertrophic disease or may simply represent a normal variant. Rule out hypertension or hyperthyroidism as possible contributing factors. Regardless, the LA remains normal which would indicate clinical stability. Serial echocardiography will be necessary to determine progression and clinical significance. Additionally, no definitive cause is identified for the murmur in this study, making it likely benign.

### HOSPITAL NAME

All Creatures Great &  
Small Veterinary  
Clinic

Given a normal LA dimension, no medications are indicated.

### REFERRING VET

Dr. Sadahiro

Anesthetic risk is mild, however any cat with this degree of fibrosis and diastolic dysfunction will be at risk for iatrogenic IV fluid overload should they be needed in the future. No obvious contraindication for steroid use at this time.

### INVOICE

27015

Monitor for any development of clinical signs, including labored breathing or signs of a blood clot (paralysis, neurologic change).

### DATE

10/20/22

A recheck echocardiogram is recommended in 6-12 months to screen for any evidence of progression.



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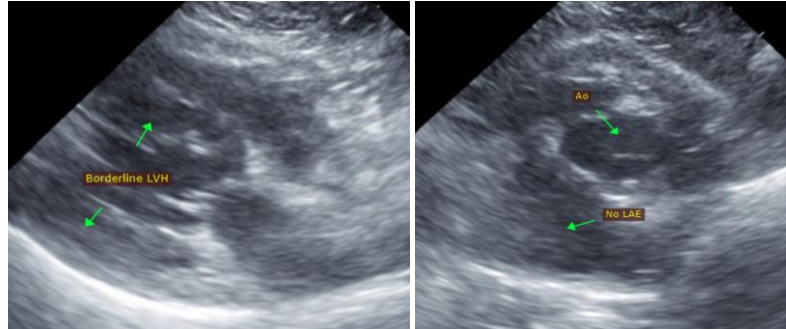
**INVOICE**

27015

**DATE**

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**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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