



**PATIENT**

Koda Cushing

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

2 years

**WEIGHT**

10.7lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

Dr. Karen Ebersole

**HOSPITAL NAME**

Scanvet

**REFERRING VET**

Dr. Fortin

**INVOICE**

27138

**DATE**

10/26/22

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Grade 4/6 heart murmur.

-Current medications: Pimobendan 1.25mg BID.

-Pertinent previous echo findings (5/2022 MML): No LVH, borderline LVE, mild to moderate LAE, mild MR, mild RAE, intermittent LVOTO. LA: 1.4, LA/AO: 1.5.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. Adequate systolic function. No LV dilation. The endocardium appears normal. The papillary muscles are normal. The mitral valve appears normal although an intermittent LVOTO is suspected on color flow. Trace eccentric mitral regurgitation. The left atrium is mildly dilated and bulbous in appearance. No obvious smoke in the left atrium. The right atrium is mildly dilated. Tricuspid valve is normal with no TR. The right ventricle appears normal. Blood flow through the LVOT is mildly elevated in velocity with a dynamic profile. Normal RVOT velocity. 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	4.9	140	0.56	1.5	0.52	54	87
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	1.3	1.5	1.4		2.7	0.9	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, findings appear similar. Mild biatrial dilation persists without evidence of progression. The LV remains essentially normal with a mild LVOT obstruction appreciated.

Given these findings, reasonable to continue Pimobendan going forward. No obvious indication for additional medications.

Prognosis is guarded long-term.

Anesthetic risk is considered mildly elevated, with risk for fluid overload, spontaneous CHF, hypotension, etc. Judicious IV fluid rates are advised to avoid fluid overload. Drugs that stimulate heart rate should be avoided unless clinically necessary (glycopyrrolate, atropine). Avoid



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ketamine, telazol, acepromazine and Dexdomitor. A reasonable protocol includes opioid/benzodiazepine premedication, propofol induction, isoflurane maintenance

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Feline

**PLAN**

Continue Pimobendan 1.25mg PO q12h.

**BREED**

DSH

A recheck echocardiogram is recommended in 6-8 months to assess progression.

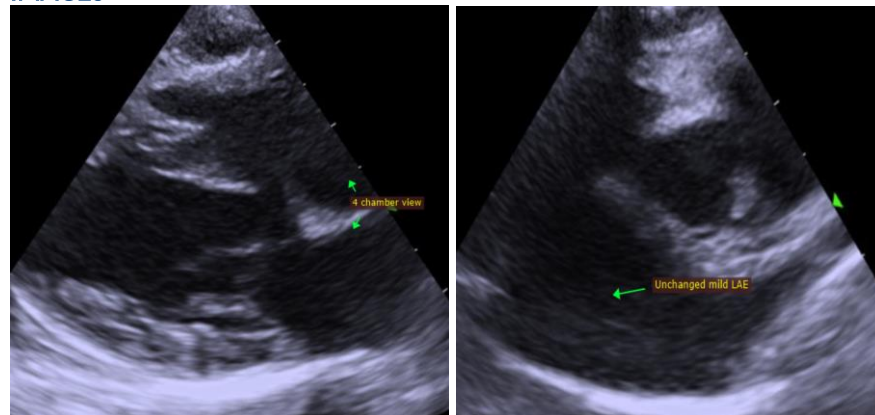
**SEX**

Male Neutered

**IMAGES**

**AGE**

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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.

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

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.

**IMAGING PERFORMED BY**

Dr. Karen Ebersole

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

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