



PATIENT

Georgia Bell

SPECIES

Canine

BREED

GSH Pointer

SEX

FI

AGE

11 mo

WEIGHT

18.9 kg

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Dr. Brian Barnes

HOSPITAL NAME

Westview VH

REFERRING VET

Dr. Barnes

INVOICE

DATE

11/11/25

PRESENTING CLINICAL SIGNS

New murmur. Asymptomatic.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

Left atrial size is normal. The mitral valve appears normal, though trace mitral regurgitation is present. Left ventricular wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve appear normal, though there is mildly increased flow velocity in the ascending aorta, as well as trace aortic insufficiency is. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

ECG during echo: Sinus rhythm

LA – 38.2 mm
IVSd – 8.7 mm
LVPWd – 9.1 mm
LVIDd – 41.3 mm
LVIDs – 28.2 mm
FS – 31.7%
RA – 21.0 mm
LVOT – 1.72 m/s
RVOT – 1.37 m/s
TR – 2.63 m/s

ASSESSMENT/RECOMMENDATIONS

This examination demonstrates no evidence of structural heart disease, as trace valvular regurgitation can be considered a normal physiologic variant. Georgia's murmur appears to be due to the presence of mildly increased flow velocity in her aorta, which is a common reason for a functional/innocent murmur to develop in cats.

No therapy is recommended based on this exam.

A recheck echocardiogram is recommended if the characteristics of Georgia's murmur change, or if other new physical exam and/or clinical abnormalities suggestive of cardiac dysfunction develop.



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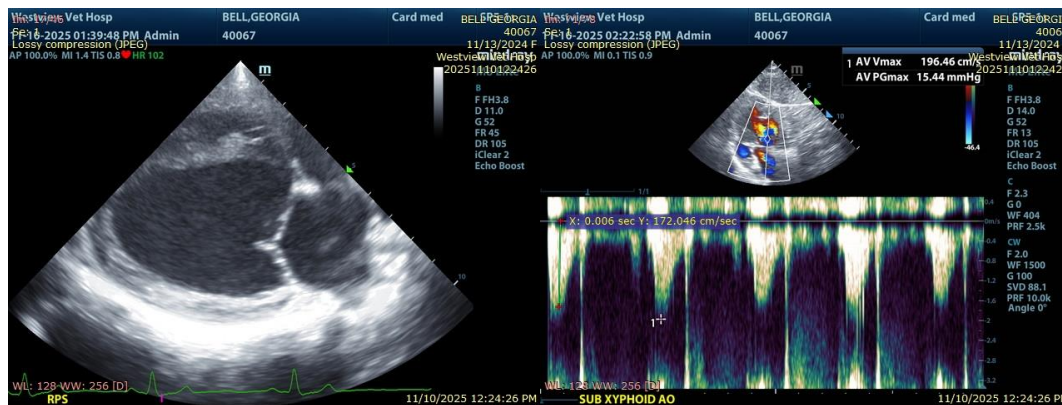
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Keith Blass, DVM, MS, DACVIM (Cardiology)

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