



## PATIENT

Moon Quidachay

## SPECIES

Feline

## BREED

DSH

## SEX

Female Spayed

## AGE

3 years

## WEIGHT

13.7lbs

## INTERPRETED BY

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

## IMAGING PERFORMED BY

Meredith Swart, DVM

## HOSPITAL NAME

Swart Veterinary  
Imaging

## REFERRING VET

Dr. Swart

## INVOICE

45831

## DATE

11/19/25

## PRESENTING CLINICAL SIGNS

History: No reported clinical signs other than occasional increased RR. No murmur/arrhythmia. Elevated BNP of 180. CXR (IVS) reported a mildly prominent heart; VHS WNL at 7.3. ECG was NSR.

## ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension without significant hypertrophy appreciated. The LV is normal in dimension with adequate function. The papillary muscles appear normal. The right ventricle is subjectively normal in size and morphology. There is no left atrial enlargement present. The right atrial appearance is unusual, with a soft tissue projection suspected mid-chamber (rule out artifact / superimposition). The overall chamber is mild to moderately enlarged. The tricuspid valve appears normal with trace/mild TR. Normal velocity. Normal LVOT and RVOT velocity. There is no obvious systolic anterior motion (SAM) of the mitral valve present. No obvious MR. No significant AI or PI. There is no pericardial effusion noted. No pleural effusion appreciated. No obvious cardiac tumors.

## CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LVWd (cm) <small>(Moise, Pipers)</small>	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	6.2	NM	0.45	1.5	0.45	52	86
FELINE CARDIAC PARAMETERS	LA/AO <small>(Boon)</small>	LA/AO HEART BASE (Swe) <small>(Abbott)</small>	LA 2D short axis Base view (cm) <small>(Abbott)</small>		LVOT VEL <small>(m/s)</small>	RVOT VEL <small>(m/s)</small>	E max <small>(m/s)</small>
NORMAL	<1.5	<1.3	<1.2		<1.6	<1.3	<0.9
PATIENT	1.3	1.2	1.0			1.3	1.3
<p><i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>                      Adapted from June Boon, Veterinary Echocardiography, 1998                      Abbott J &amp; 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.</p>							

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unusual case. The right atrium is unusual with a soft tissue progression suspected mid-chamber. A normal soft tissue superimposed is not entirely ruled out; however, the projection is seen on multiple views. This can be seen with issues such as Cor Triatriatum Dexter where a proximal high-pressure chamber is seen; however, this is certainly not definitive here. A vascular abnormality would also be possible (such as abnormal venous return), Although the chamber does appear enlarged and monitoring is advised. Trace/mild TR is noted, which may be secondary and the velocity suggests pulmonary pressures are normal. Advanced imaging may be helpful in this case. The left heart appears normal, and no additional issues are seen.

Even with mild changes seen here, this is unlikely to explain a change in breathing. If interested, referral to a local Cardiologist could be considered, as the relevance of the finding is unclear.

No medications are warranted at this time. Prognosis is guarded given the highly variable rates of progression with subclinical feline cardiomyopathy and lack of definitive diagnosis. Many cats will remain asymptomatic for a period of years, while others progress to clinical compromise sooner.



## PATIENT

Moon Quidachay

## SPECIES

Feline

## BREED

DSH

## SEX

Female Spayed

## AGE

3 years

## WEIGHT

13.7lbs

## INTERPRETED BY

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

## IMAGING PERFORMED BY

Meredith Swart, DVM

## HOSPITAL NAME

Swart Veterinary  
Imaging

## REFERRING VET

Dr. Swart

## INVOICE

45831

## DATE

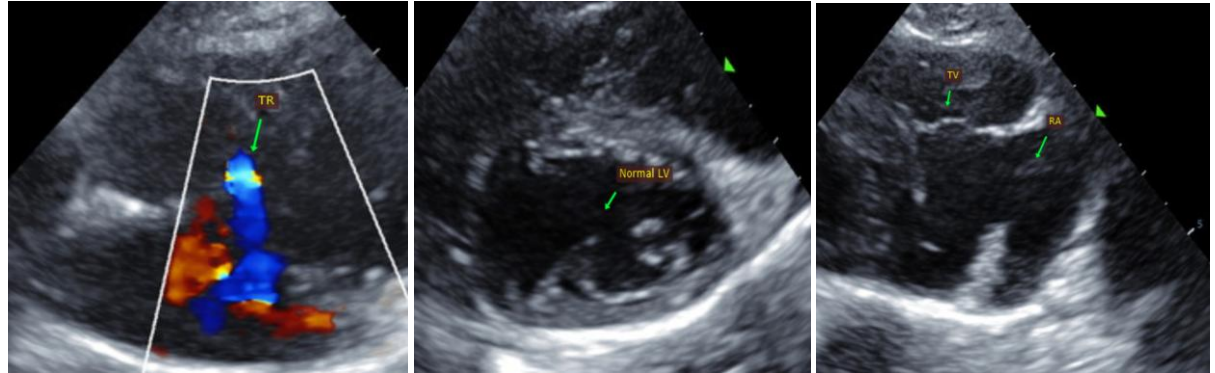
11/19/25

Close monitoring for progressive right atrium dilation in the future will help determine long term outcome.

## PLAN

Consider referral if desired. Otherwise, recheck echocardiogram is recommended in 6-12 months.

## 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