



**PATIENT**

Luna Vicens

**SPECIES**

Feline

**BREED**

DMH

**SEX**

Female Spayed

**AGE**

8.5 years

**WEIGHT**

10lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

G. Ferrer, DVM

**HOSPITAL NAME**

Pulse: Pet Ultrasound  
Services

**REFERRING VET**

Dr. Carrero

**INVOICE**

45885

**DATE**

11/21/25

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Recent onset of vomiting. On Cerenia and Famotidine.  
-Pertinent previous echo findings (12/2024 CR): LVH, DRVOTO, suspect HOCM.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is mildly hypertrophied. There is a mildly hyperechoic endocardium consistent with fibrosis and ventricular remodeling. Mild papillary muscle remodeling. The right ventricle is subjectively normal in size and morphology. There no left atrial enlargement present. No right atrial enlargement present. Normal RVOT velocity. Systolic anterior motion (SAM) is suspected as was previously described. There is trace eccentric mitral regurgitation present secondary to SAM. No AI. 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	4.5	120	0.62	1.2	0.65	51	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	NM	1.2	1.3		0.6	0.7	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 report, findings appear similar. Mild LVH is unchanged with no LA dilation. No additional issues are seen.

Given these findings, reasonable to simply monitor this case going forward. Routine BP and T4 monitoring is recommended.

Monitor at home for any respiratory signs or blood clot events (neurologic change, paralysis, etc.).

Anesthetic risk is considered mild, however judicious IV fluid rates are advised to avoid fluid overload. Additionally, drugs that stimulate heart rate should be avoided unless clinically necessary (ketamine, glycopyrrolate, atropine).

**PLAN**

Screening blood pressure and T4 are recommended every 6 months.

Recommend recheck echocardiogram in 1 year to assess for progression, sooner if clinical issues arise.



## PATIENT

Luna Vicens

## SPECIES

Feline

## BREED

DMH

## SEX

Female Spayed

## AGE

8.5 years

## WEIGHT

10lbs

## INTERPRETED BY

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

## IMAGING PERFORMED BY

G. Ferrer, DVM

## HOSPITAL NAME

Pulse: Pet Ultrasound  
Services

## REFERRING VET

Dr. Carrero

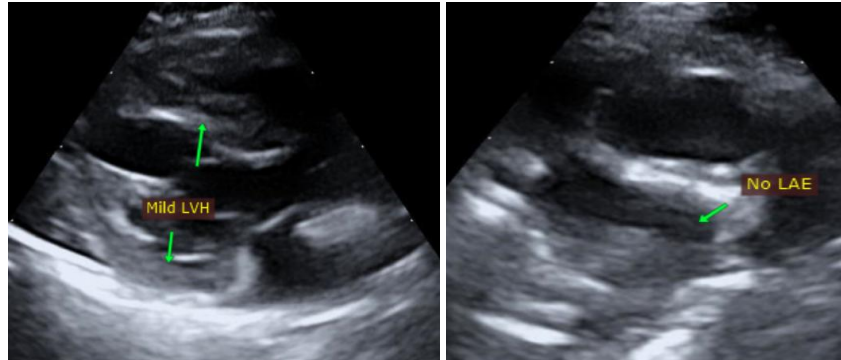
## INVOICE

45885

## DATE

11/21/25

## 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](mailto:info@sonopath.com)