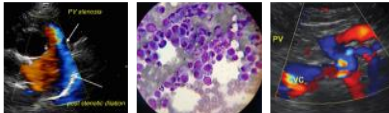


IMAGING PERFORMED BY

IntraPet.com



PATIENT

May Schwimmer

SPECIES

Feline

BREED

DSH

SEX

Female Spayed

AGE

11.12.07

WEIGHT

7.63lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

HOSPITAL NAME

Banfield Timonium

REFERRING VET

Dr. Borrison

INVOICE

27334

DATE

11.8.22

PRESENTING CLINICAL SIGNS

History: Recheck echo. History of left-sided murmur, grade 3/6; pre-anesthetic check.

-Pertinent abnormal PE/Chem/CBC/UA Results: BW from June NSF.

-Current medications: None.

-Sedation used: Not required to complete full diagnostic ultrasound.

-Pertinent previous ultrasound results (10/13/21 MML): Normal with LV remodeling. Unknown murmur origin.

-STAT: Not requested.

-Imaging performed by: Stephanie Warga RDCS, RVT.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. There is a diffusely hyperechoic endocardium consistent with fibrosis. The endocardium appears remodeled. Mild papillary muscle hypertrophy and remodeling. 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. Blood flow through both the LVOT and RVOT are normal in velocity. No obvious cause for the murmur is identified. No cardiac tumors are seen. No pleural or pericardial effusion.

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LWVd (cm) <small>(Moise, Pipers)</small>	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	3.5-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	3.5		0.40	1.6	0.42	55	84
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 (m/s)	RVOT VEL (m/s)	E max (m/s)
NORMAL	<1.5	<1.3	<1.2		<1.6	<1.3	<0.9
PATIENT	NM	1.3	1.2		1.4	1.2	NM

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.

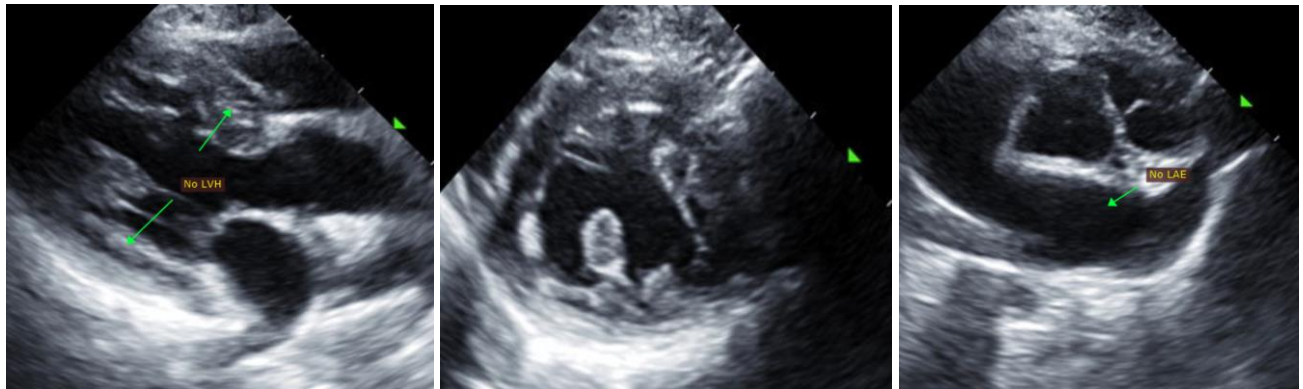
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unchanged cardiac structure and function. Compared to the prior studies, LV remodeling and fibrosis persists without LA or LV enlargement. No cause for the murmur remains apparent.

Given these findings, no medications are indicated. With any degree of remodeling and diastolic stiffening, there is an elevated risk for fluid overload in this patient and judicious IV fluid use is recommended. The risk for general anesthesia is low, however heart rate stimulating drugs such as atropine, glycopyrrolate or ketamine should be avoided unless medically necessary.

Recommend recheck echocardiogram in 12-18 months to assess for progression and reassess murmur origin, sooner if clinical signs arise.

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