



PATIENT

Kory Knox

PRESENTING CLINICAL SIGNS

History: Recheck echo.
-Current medications: Atenolol 12.5mg/ml. Gives 0.5ml SID.
-Pertinent previous echo findings (5/2022 MML): Borderline LVH, no LAE, minimal LVOTO, MV dysplasia.

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is borderline with no significant hypertrophy. There is a diffusely hyperechoic endocardium with regions of remodeling. The right ventricle is normal. There is no left atrial enlargement present. No right atrial enlargement present. Normal RVOT velocity, however color Doppler is suggestive of a dynamic obstruction. Abnormal anterior motion of the mitral valve is seen on 2D; no LVOTO on color flow or spectral Doppler. The anterior leaflet of the MV is elongated and thickened, consistent with dysplasia. There is mild mitral regurgitation. No other obvious valvular regurgitation is present. There is no pericardial effusion noted. No pleural effusion appreciated.

BREED

DLH

SEX

Male Neutered

AGE

19 months

CARDIAC CHART

WEIGHT

11.7lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

| 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 | 5.3 | 125 | 0.58 | 1.6 | 0.56 | 45 | 80 |
| 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 | 1.2 | 1.2 | 1.1 | | 1.0 | 0.8 | 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.

IMAGING PERFORMED BY

Crystal Hill, RVT

HOSPITAL NAME

Hawkins Animal Hospital

REFERRING VET

Dr. Hawkins

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Compared to the prior study, findings appears similar. The LVOTO is well controlled, and the heart rate is reasonable. No significant LVH or LAE has developed. No additional issues are identified.

Continue atenolol as prescribed with no additional medications indicated.

INVOICE

27383

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

DATE

11/9/22

Long term prognosis is guarded given the age of the patient and highly variable nature of asymptomatic feline heart disease. Many cats will remain asymptomatic until mid-life or



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beyond. Close monitoring for progression of LA dilation in the future will help determine long term prognosis.

SPECIES

Feline

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 (glycopyrrolate, atropine). Avoid vasodilators as this may worsen the obstruction. A reasonable protocol includes opioid/benzodiazepine premedication, propofol induction, isoflurane maintenance. Additionally, steroids should be used with caution in cats, as even a 'normal' heart can develop evidence of intolerance and fluid retention.

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DLH

SEX

Male Neutered

PLAN

Continue atenolol as prescribed.

AGE

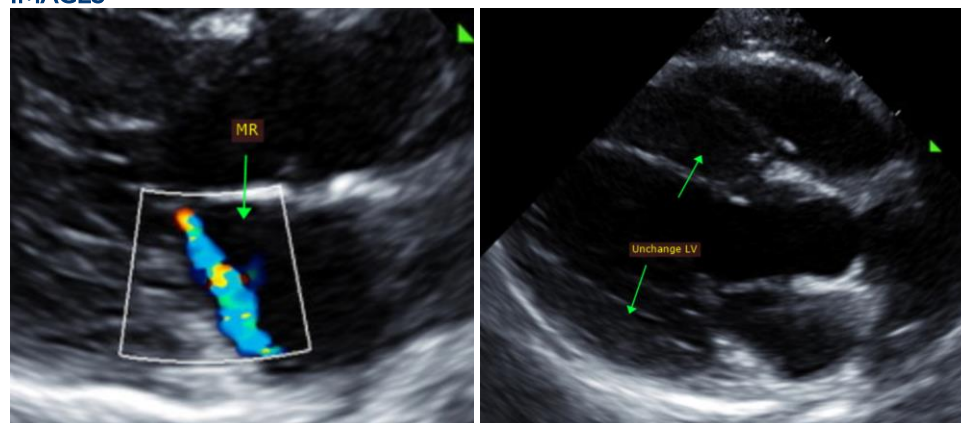
19 months

Recommend recheck echocardiogram in 12 months to assess for progression, sooner if clinical issues arise.

WEIGHT

11.7lbs

IMAGES



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DVM DACVIM
(Cardiology)

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.

IMAGING PERFORMED BY

Crystal Hill, RVT

HOSPITAL NAME

Hawkins Animal
Hospital

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.

REFERRING VET

Dr. Hawkins

Maggie Machen Lamy, DVM
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INVOICE

27383

DATE

11/9/22