



## PATIENT

Jerry Miller

## PRESENTING CLINICAL SIGNS

History: Possible stroke, owner reports an episode of drooling, clear discharge. Exam: Possible blindness, staring, neurological, no PLR bilaterally. Grade 3/6 murmur.

## SPECIES

Feline

## ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. There is a mildly hyperechoic endocardium consistent with mild fibrosis. The papillary muscles are mildly remodeled and hyperechoic. The endocardium also appears remodeled. 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. Trace MR. Blood flow through both the LVOT and RVOT is normal in velocity. Trace TR. No pleural or pericardial effusion seen. No obvious cardiac tumors.

## BREED

DSH

## SEX

Male Neutered

## CARDIAC CHART

## AGE

14 years

## WEIGHT

12lbs

## INTERPRETED BY

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

## IMAGING PERFORMED BY

Sands Hill Mobile  
Veterinary Ultrasound

## HOSPITAL NAME

Surf City Animal  
Hospital

## REFERRING VET

Dr. Carrell

## INVOICE

27750

## DATE

12/1/22

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	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	5.4	166	0.45	1.3	0.42	61	92
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	1.0	1.0		1.1	1.3	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

Overtly normal geriatric cardiac structure and function are documented in this study. The LV wall thickness is normal and there is no evidence of elevated left atrial pressure. There is mild remodeling and fibrosis of the left ventricular wall, which is likely a normal variant. No additional issues are identified.

Given these findings, the clinical issues are unlikely to be cardiac-related (i.e., low risk of a cardiac thrombus with a normal left atrium), however this does not rule out non-cardiac thrombi etc. Further neurologic and orthopedic evaluation is advised.

No cardiac contraindication for general anesthesia.

Recommend recheck echocardiogram in 1 year to assess any progressive issues or development of silent cardiomyopathy, sooner if a murmur develops in the interim.



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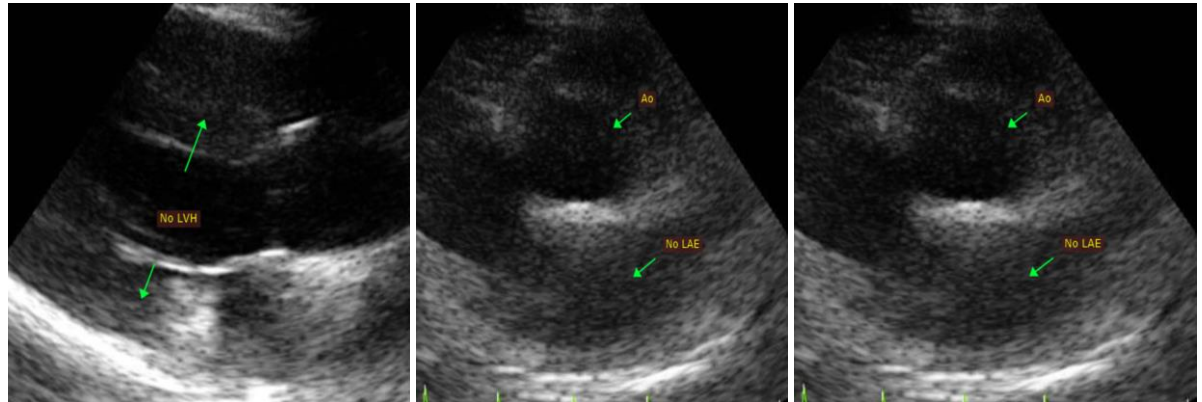
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**IMAGES**



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**  
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