



**PATIENT**

Chessie Minor

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Assess prior to dental.

-Pertinent previous echo findings (3/2021 MML): NO LVH with significant remodeling. LA; 1.0.

**SPECIES**

Feline

**BREED**

DSH

**ECHOCARDIOGRAM FINDINGS**

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

**SEX**

Male Neutered

**AGE**

10 years

**WEIGHT**

13lbs

**CARDIAC CHART**

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	5.9	186	0.50	1.7	0.50	46	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		0.8	0.9	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.*

**INTERPRETED BY**

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Compared to the prior study, findings are similar. No LV hypertrophy has developed, and the LA remains normal. Diffuse remodeling and fibrosis is similar to previous; however, a lack of progression is a good sign. No additional issues are identified.

**HOSPITAL NAME**

Given these findings, no medications are indicated.

**REFERRING VET**

Sarah Pender, CVT

No cardiac contraindication for general anesthesia. With diastolic dysfunction and LV remodeling, mild IV fluid restriction is advised.

**INVOICE**

28012

**DATE**

12/14/22

Recommend recheck echocardiogram in 1 year to screen for any progressive changes, sooner should a murmur, gallop or clinical signs of cardiac compromise be noted in the future.

**IMAGING PERFORMED BY**

svsmobileimaging.com 309 - 737 - 3070



**Clinical Sonography & Telecytology**

EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

**PATIENT**

Chessie Minor

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

10 years

**WEIGHT**

13lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Hartmann

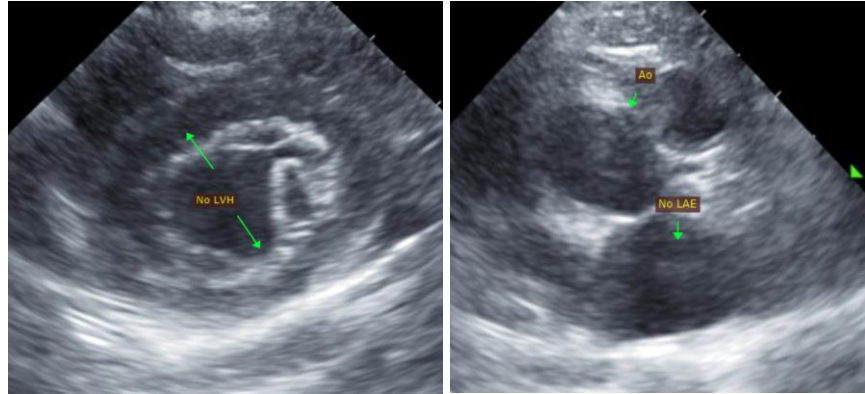
**INVOICE**

28012

**DATE**

12/14/22

**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. 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