



**PRESENTING CLINICAL SIGNS**

History: Murmur. Hyperthyroid – not fully controlled, but significantly improved.

**DATE**

12/19/22

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**

Rebekah Jakum

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

Left atrial size is normal. The mitral valve appears normal, though very mild mitral regurgitation is present. There is mild hypertrophy of the basilar-most portion of the interventricular septum. The remainder of the septum and left ventricular posterior wall are normal in thickness. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.

**PATIENT**

Tux Hanzl

LA/Ao – 1.16  
IVSd – 6.4 mm  
LVPWd – 4.7 mm  
LVIDd – 11.8 mm  
LVIDs – 4.8 mm  
FS – 59%  
LVOT – 1.21 m/s  
RVOT – 1.05 m/s

**SPECIES**

Feline

**ASSESSMENT/RECOMMENDATIONS**

Tux’s murmur appears to be due to the presence of very mild regurgitation of blood across his mitral valve. The hemodynamic effects of the regurgitation also appear to be mild, as Tux does not have secondary dilation of his left atrium. As such, Tux’s mitral regurgitation appears to be well-tolerated at present, and his current risk for the development of clinical signs secondary to it appears to be low.

**BREED**

DSH

Also seen in this exam is mild hypertrophy of the basilar-most portion of Tux’s interventricular septum. It’s possible that this could represent a normal variant, however, the presence of focal hypertrophy secondary to hypertrophic cardiomyopathy (HCM) or Tux’s hyperthyroidism cannot be ruled out.

**SEX**

MN

No therapy is recommended based on this exam.

**AGE**

A recheck echocardiogram is recommended in ~6 months.

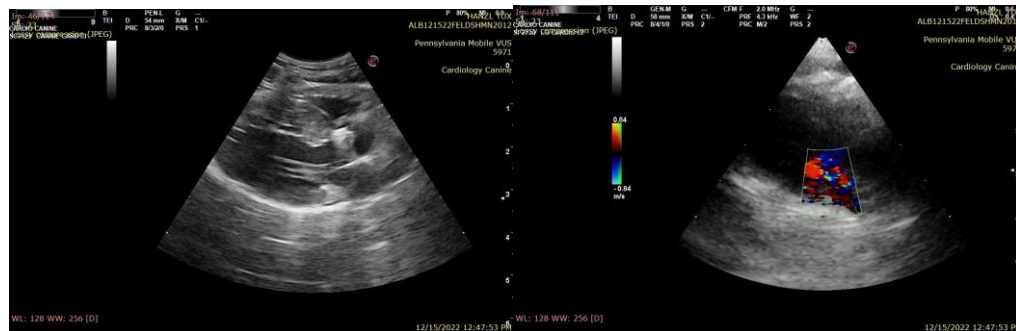
10 y

**WEIGHT**

8.5 lb

**HOSPITAL NAME**

Alburtis AH



**REFERRING VET**

Dr. Smith



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.

**DATE**

12/19/22

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.

**PERFORMED BY:**

**Keith Blass, DVM, MS, DACVIM (Cardiology)**  
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631-804-5754

Rebekah Jakum

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**PATIENT**

Tux Hanzl

**SPECIES**

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