



PATIENT

Jackson Wilson

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

7.29.14

WEIGHT

16.42lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

HOSPITAL NAME

Greenbrier Veterinary
Clinic

REFERRING VET

Dr. Streett

INVOICE

27794

DATE

12.2.22

PRESENTING CLINICAL SIGNS

History: Recheck echo. Doing well and is stable on current medications. Grade 3/6 heart murmur. on 11/8/2021. No murmur noted on 10/20/2022.

-Current medications: Methimazole 2.5mg 1 tab AM, 1/2-tab PM (Started 11/9/2021), Chlorpheniramine 4mg 1 tab BID (Started 1/14/2022), Atenolol 25mg 1/2 SID (Started 5/14/2020) Baby Aspirin 1/4-tab Tues/Sat PM only (Started 5/16/2020), Dasuquin Advanced 2 capsules SID (Started 10/20/2022)

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

-Pertinent previous ultrasound results (2/2020 MML): Irregular LV with mild hypertrophy, mild LAE. LVOT: 2.2, mild MR.

-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 highly irregular, with regions of mild hypertrophy (IVS) and regions of thinning. There is a diffusely hyperechoic endocardium consistent with fibrosis and ventricular remodeling. The right ventricle is subjectively normal in size and morphology. There is mild left atrial enlargement present. No right atrial enlargement present. Normal RVOT and LVOT velocity. Trace eccentric mitral regurgitation. No other obvious valvular regurgitation is present. There is no pericardial effusion noted. No pleural effusion appreciated. No obvious cardiac tumors.

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	LWVd (cm) (Moise, Pipers)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	3.5-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	7.4	NM	0.61	1.46	0.61	53	87
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	NM	1.5	1.4		0.97	0.9	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

Compared to the prior study, findings are remarkably similar. The LVOTO has resolved with Atenolol therapy and the LV appearance is similar. Mild left atrial enlargement has not progressed, and no additional issues are identified.

Given these findings, reasonable to continue Atenolol going forward. From a cardiac standpoint, there is no indication for Aspirin therapy prior to left atrial enlargement if this is being used as an anti-coagulant. No additional medications are warranted.

Prognosis remains guarded; however, it is certainly encouraging that there is no progression seen in nearly 3 years.

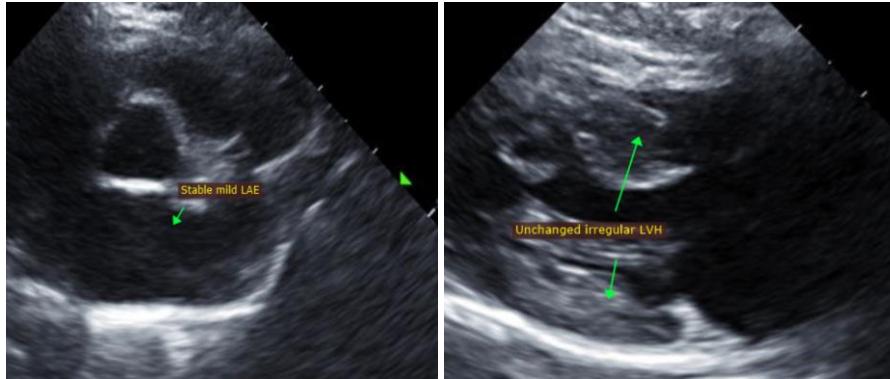
Monitor at home for any respiratory signs or blood clot events (neurologic change, paralysis, etc.). The risk for general anesthesia is low, however heart rate stimulating drugs such as atropine, glycopyrrolate should be avoided unless medically necessary. Even without significant pathology, with this degree of remodeling and diastolic stiffening there is elevated risk for fluid overload in this patient. Judicious IV fluid use is recommended.

PLAN

Screening blood pressure recommended.

Recommend recheck echocardiogram annually, sooner if clinical issues 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