



PATIENT

Leo Chalk

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

8 years

WEIGHT

9lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

IMAGING PERFORMED BY

Kelly Reschny, RVT

HOSPITAL NAME

Governors Road
Animal Hospital

REFERRING VET

Dr. Dogar

INVOICE

27777

DATE

12/2/22

PRESENTING CLINICAL SIGNS

History: Raspy breathing for the past 3-4 weeks. No obvious heart murmur but moderate to severe bronchial sounds. Dry cough on tracheal pinch.
-Current Medications: Clopidogrel, Fortekor Vetmedin, Furosemide.
-Radiographs: Consistent with CHF and cardiomegaly.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension with regions of borderline thickening. There is a diffusely hyperechoic endocardium consistent with fibrosis. Regions of irregularity. The papillary muscles are remodeled. Systolic function is adequate. The left atrium is severely dilated and bulbous in appearance. No obvious smoke. Trace mitral regurgitation. No tricuspid regurgitation. The right atrium is normal with no obvious smoke. The right ventricle is normal. Blood flow through the RVOT and LVOT is normal in velocity. No pericardial effusion. No obvious pleural effusion.

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	4.1	230	0.50	1.36	0.58	38	70
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	2.3	2.3	2.1		1.0	1.8	NM
<p><i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i> 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.</p>							

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The finding of left atrial dilation in the face of normal LV wall thickness and adequate systolic function is most consistent with Unclassified Cardiomyopathy (UCM); however, some prior infectious or inflammatory insult to the myocardium cannot be definitively ruled out. There is normal wall thickness, ruling out typical hypertrophic disease. No additional issues are identified.

Regardless of categorical classification, these findings support the prior diagnosis of CHF. If the patient is doing well, no need for medication adjustments at this time with standard dosing recommended as below.

Prognosis is guarded, as there will always remain risk for development of blood clots, and/or malignant arrhythmias/sudden death in the future. The average survival time once



PATIENT
Leo Chalk

CHF is diagnosed is <1 year. Monitoring of sleeping breathing rates at home is recommended as the best way to screen for recurrent/impending CHF at home.

SPECIES
Feline

Elective anesthesia, fluid therapy and/or steroids should be avoided lifelong.

BREED
DSH

PLAN

Oral medications: Administer Plavix 18.75mg PO SID (NOTE: this medication is very bitter and may causing foaming at the mouth- coat in entirety). Administer Lasix to 1-2mg/kg PO q12h. Administer Pimobendan at 1.25mg PO q12h. Administer ACEI 0.5mg/kg PO q12h.

SEX
Male Neutered

Recheck renal values and BP every 3-4 months lifelong.

AGE

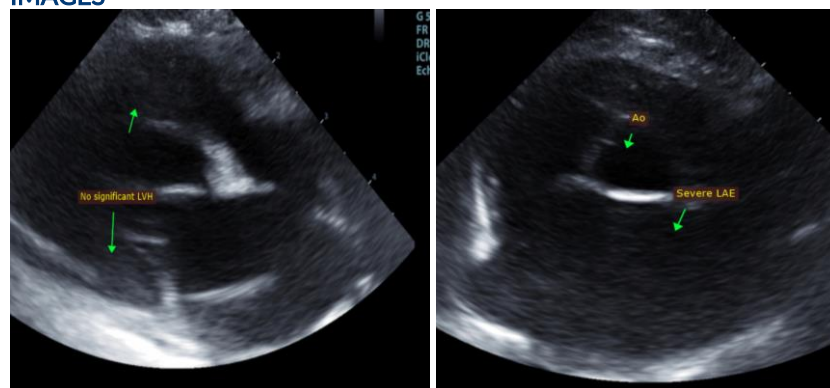
8 years

Recheck echocardiogram in 6 months once stable on oral medications to reassess for progression.

WEIGHT
9lbs

IMAGES

INTERPRETED BY
Maggie Machen Lamy,
DVM DACVIM
(Cardiology)



IMAGING PERFORMED BY
Kelly Reschny, RVT

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.

HOSPITAL NAME
Governors Road
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. Dogar

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

INVOICE
27777

DATE
12/2/22