



PRESENTING CLINICAL SIGNS

DATE History: Echo last year revealed HCM with no LAE. Recent ECG showed increased R wave amplitude. No current medications. Pre-anesthetic evaluation (dental).

12/27/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Dr. Meredith Swart

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve appears normal, though mild mitral regurgitation is present. Left ventricular wall thickness is normal. Left ventricular internal 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 is 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.

LA/Ao – 1.37
IVSd – 5.0 mm
LVPWd – 4.8 mm
LVIDd – 12.0 mm
LVIDs – 4.5 mm
FS – 62.5%
LVOT – 0.95 m/s
RVOT – 1.52 m/s

PATIENT

Artemis Smoke

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

8 y

WEIGHT

3.5 kg

HOSPITAL NAME

Swart Veterinary
Imaging

REFERRING VET

Dr. Swart

ASSESSMENT/RECOMMENDATIONS

The only abnormality seen in this exam is mild regurgitation of blood across Artemis's mitral valve, as the previously noted left ventricular hypertrophy is not present in today's images. The hemodynamic effects of the regurgitation also appear to be mild, as Artemis does not have secondary dilation of her left atrium, indicating that her current risk for the development of congestive heart failure and/or thromboembolic disease appears to be low.

Artemis's cardiovascular risk for general anesthesia is mildly increased based on this exam, therefore, I recommend avoiding the use of alpha-2 agonists in the anesthetic protocol and reducing the IV fluid rate by 25% as precautions. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

No therapy is recommended based on this exam.

A recheck echocardiogram is recommended in 9 months, sooner if new clinical signs compatible with cardiac dysfunction develop.



DATE

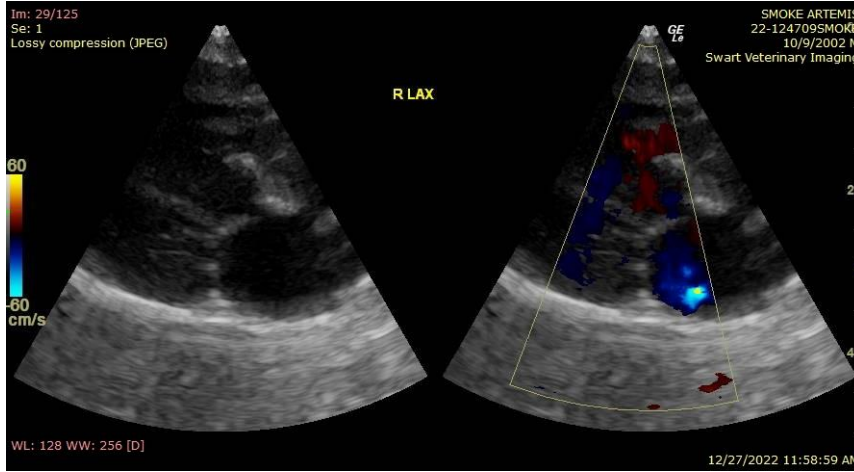
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PATIENT

Artemis Smoke

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.

SPECIES

Feline

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.

Keith Blass, DVM, MS, DACVIM (Cardiology)
KeithBlass@gmail.com
631-804-5754

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