

PATIENT

LouLou Simmen

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

13 y

WEIGHT

4.62 kg

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Dr. Judy McFarlen

HOSPITAL NAME

Westview VH

REFERRING VET

Dr. McFarlen

INVOICE

DATE

12/29/25

PRESENTING CLINICAL SIGNS

Previously diagnosed with mild LAE and pleural effusion. Receiving furosemide 5 mg BID, benazepril 1.25 mg BID, and clopidogrel 8.75 mg SID. Recent radiographs showed cardiomegaly but no evidence of CHF.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study. This exam is compared to the one performed 10/28/25.

Left atrial size is normal. The mitral valve appears normal, though trace 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 appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen. No pleural effusion is present.

ECG during echo: Sinus rhythm

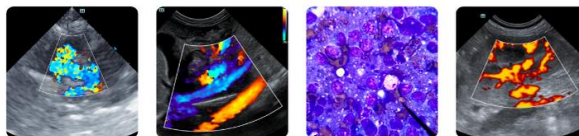
LA - 13.4 mm (prev. 17.7 mm)
IVSd - 4.3 mm (prev. 4.4 mm)
LVPWd - 4.4 mm (prev. 4.4 mm)
LVIDd - 11.5 mm (prev. 16.5 mm)
LVIDs - 4.2 mm (prev. 6.2 mm)
FS - 54.8% (prev. 62.4%)
RA - 8.5 mm (prev. 11.4 mm)
LVOT - 0.91 m/s (prev. 1.00 m/s)
RVOT - 0.96 m/s (prev. 1.14 m/s)

ASSESSMENT/RECOMMENDATIONS

This examination demonstrates improvement compared to October's echocardiogram, as LouLou's left atrial size has decreased and is now normal, suggesting that there may have been a transient cause of her previous dilation. Given the absence of dilation in today's exam, LouLou's current risk for the development of congestive heart failure and/or thromboembolic disease appears to be low.

No change in Lulu's cardiac medications is recommended at this time, however, if she continues to show no evidence of cardiac chamber dilation, it may be possible to taper and/or discontinue one or more of her medications in the future.

A recheck echocardiogram is recommended in 6 months.



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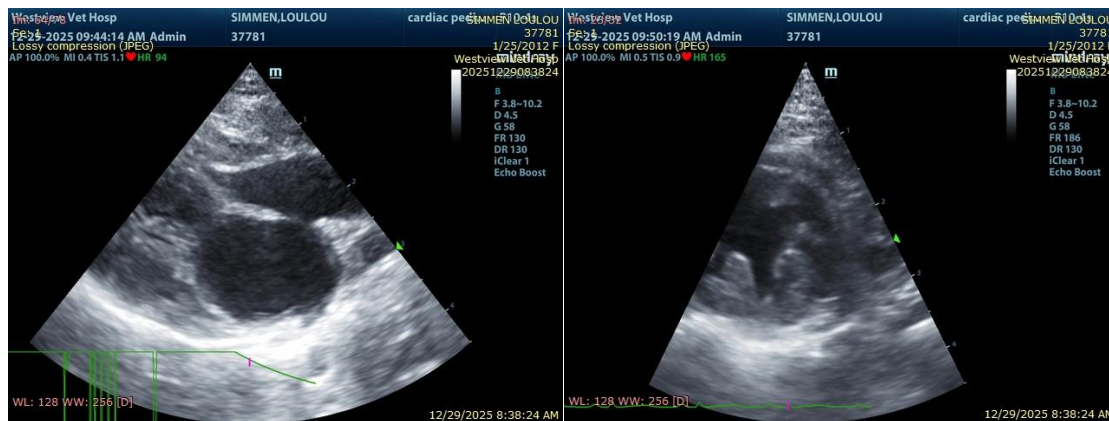
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Keith Blass, DVM, MS, DACVIM (Cardiology)

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