


PRESENTING CLINICAL SIGNS

DATE History: Tachycardia, arrhythmia. Possible low-grade murmur. Very thin with weight loss. Has started to gain weight back since increasing dose of Felimazole.

12/30/21

ECHOCARDIOGRAPHIC FINDINGS

PERFORMED BY: 2D, M-mode, and Doppler study.

Crystal Hill

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

The moderate left atrial dilation. Left auricular function is depressed, though no spontaneous contrast or thrombi are visualized in the auricle. The mitral valve appears normal, though mild mitral regurgitation is present. There is mild left ventricular hypertrophy. Left ventricular internal dimensions are normal. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal, though trace aortic insufficiency is present. 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 are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Leo Clark

LA - 20.2 mm
LA/Ao - 2.14
IVSd - 6.4 mm
LVPWd - 6.3 mm
LVIDd - 16.3 mm
LVIDs - 5.4 mm
FS - 66.8%
RA - 14.8 mm
LVOT - 1.10 m/s
RVOT - 0.80 m/s

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

15 y

WEIGHT

4.12 kg

ELECTROCARDIOGRAPHIC FINDINGS

A single lead ECG is submitted for review.

HR: 214 bpm
Rhythm: Sinus with VPCs

The underlying rhythm is a mild sinus tachycardia. All sinus complex amplitudes and intervals are within normal limits. There are occasional single VPCs. No atrial ectopy or conduction blocks are seen.

ASSESSMENT/RECOMMENDATIONS

This examination demonstrates mild hypertrophy of Leo's left ventricular walls, which could either be due to the presence of hypertrophic cardiomyopathy (HCM), cardiac thyrotoxicosis, or a combination of the two. Secondary to his hypertrophy, Leo has moderate dilation of his left atrium. Given this, Leo is at risk for the development of congestive heart failure and/or thromboembolic disease, therefore, careful monitoring for signs associated with these conditions is recommended.

HOSPITAL NAME

Beatties PH Stoney
Creek

Leo's ECG demonstrates the presence of occasional VPCs, which could either be secondary to his left ventricular hypertrophy or hyperthyroidism. Mild ventricular arrhythmias are well-tolerated in cats, though careful monitoring for progression is recommended, as more advanced arrhythmias can result in syncope and/or sudden death.

REFERRING VET

Dr. Baskin

Recommended therapy at this time includes enalapril (1.25 mg BID) and clopidogrel (18.75 mg SID).

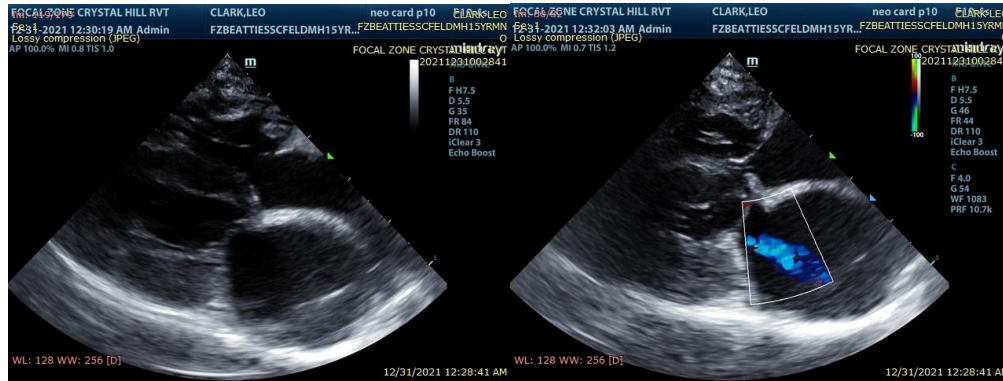


DATE

A renal/electrolyte profile is recommended in 1-2 weeks. A recheck ECG is recommended in 2 months. A recheck echocardiogram is recommended in 6 months. Tthoracic radiographs are recommended if clinical signs compatible with congestive heart failure develop.

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PATIENT

Leo Clark

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.

BREED

Keith Blass, DVM, MS, DACVIM (Cardiology)

DSH

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SEX

MN

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Dr. Baskin