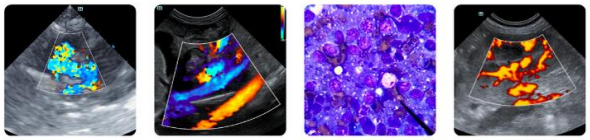

PATIENT

Beverly Leslie Reynolds

SPECIES

Feline

BREED

Ragdoll

SEX

Female Spayed

AGE

3.2 years

WEIGHT

7lbs

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY

Kristen Carpenter, DVM

HOSPITAL NAME

Pennridge Animal Hospital

REFERRING VET

Dr. Heller

INVOICE

46798

DATE

2/11/26

PRESENTING CLINICAL SIGNS

History: Recheck echo (12/2023): History of HOCM previously diagnosed as a kitten. Grade 2/6 heart murmur. Medications initiated; discontinued.
Bloodwork 1/28/26: NSF (T4 normal, BNP 106). BP: Unable to obtain d/t fractious nature.
-Pertinent previous echo findings (12/2023): LA 1.10, Ao 0.9. The LV end diastolic internal dimension is WNL (LVID 1.16/.46 FS 60% EF 92% IVS .38 LVP .49 RV .16). Last echo - DRVOTO was not noted on this scan although it was seen at diagnosis.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. There is a mildly hyperechoic endocardium consistent with age-related fibrosis. Mild remodeling. The papillary muscles are hyperechoic yet normal in size. The left atrium is normal in size. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility. Mild MR. No SAM identified. The tricuspid valve appears normal in structure and mobility. No TR. Blood flow through both the LVOT and RVOT are normal in velocity. No AI/PI seen. No effusions. No obvious cardiac tumors. Frequent ventricular arrythmias throughout.

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	3.2	NM	0.43	1.1	0.45	47	90
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	1.1	1.2		0.7	1.1	NM

***Note: All measurements based upon multi-modal images and methods. An average value is reported.*
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

Overtly normal cardiac structure and function. Mild fibrosis of the left ventricular wall is noted, which is likely a normal age-related variant. Mild MR is noted, which is likely the cause of the murmur; however, an obvious LVOT obstruction is not visualized. No additional valve leaks are noted, and flow through the great vessels is normal in velocity. No additional structural issues are seen.

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These findings do not support a history of HOCM, nor do the included previous measurements. Regardless, what is seen here is relatively mild and certainly does not warrant therapy. That being said, an obvious arrythmia is present and a**n ECG should be obtained.**

Given these findings and a normal LA dimension, no medications are indicated. Prognosis is open.

Anesthesia is not advised prior to further arrhythmia evaluation.

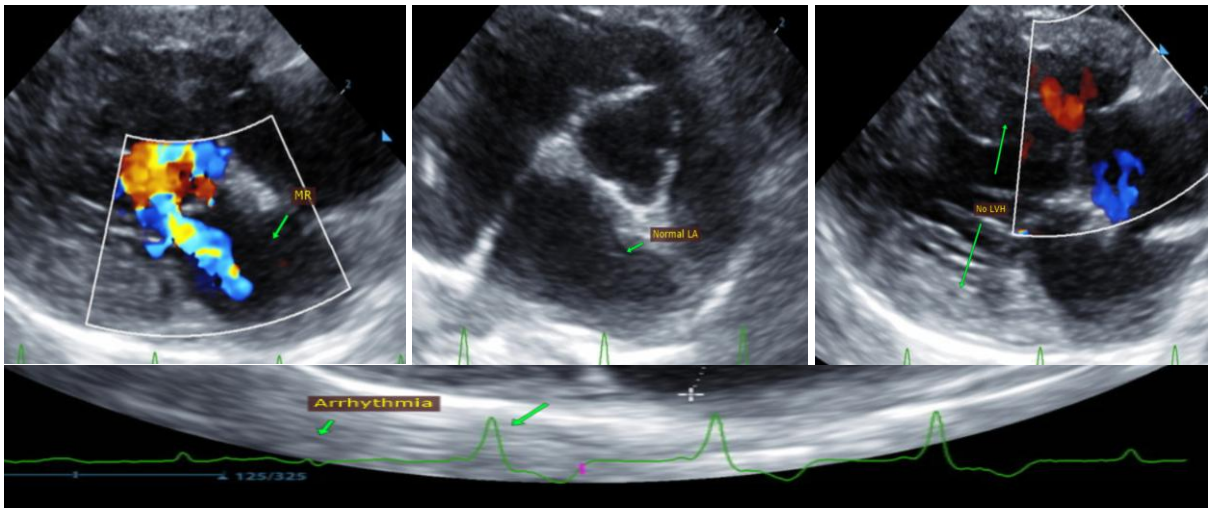
Monitor at home for signs of cardiac compromise, including respiratory changes and/or signs of a blood clot event (paralysis, neurologic changes).

PLAN

A full ECG is recommended.

Recommend recheck echocardiogram in 6-12 months, sooner if clinical signs arise in the interim.

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
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