



PATIENT

Bella Wilmott

PRESENTING CLINICAL SIGNS

History: Grade 5/6 bilateral heart murmur. Not on any medications.
-Abnormal PE/Chem/CBC/UA Results: BUN 37, creat 2.5.

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is irregular with significant basilar thickening contrasting regions of normal wall thickness. There is a diffusely hyperechoic endocardium consistent with fibrosis. The papillary muscles are mildly hypertrophied as well. The endocardium also appears remodeled. The left atrium is severely dilated and bulbous in appearance. Subtle smoke. Auricular dilation. The right atrium is normal in dimension. The right ventricle appears normal. The mitral valve is mildly thickened with moderate eccentric MR. Elevated MR velocity. No obvious TR. Blood flow through the RVOT and LVOT is normal in velocity. No pleural or pericardial effusion seen. No obvious cardiac tumors.

BREED

DSH

SEX

Female Spayed

CARDIAC CHART

AGE

8 years

WEIGHT

8.3lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Diane McFadden

HOSPITAL NAME

Warren Animal
Hospital

REFERRING VET

Dr. Zaccheo

INVOICE

22598

DATE

2/16/22

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	3.8	220	0.75	1.4	0.78	48	83
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	2.5	1.8		2.0	2.0	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

The finding of an irregular LV with significant hypertrophy is most consistent with hypertrophic cardiomyopathy. There is also significant eccentric mitral regurgitation, which may reflect a primary valvular issue as well. Regardless of academic diagnosis, the LA is severely dilated, indicating there is risk for congestive failure going forward. Serial echocardiography will be necessary to determine progression. An intermittent arrhythmia is noted throughout the study and a baseline ECG is recommended.

Even without reported symptoms, full cardiac support is recommended in this case as below given the high risk for acute decompensation. Close monitoring for any clinical signs at home is advised.

Unfortunately, the mean survival time for cats with CHF is 8-12 months, however most are able to maintain a good quality of life on medications. Patient will always remain at high risk for recurrent episodes of CHF and development of blood clots in the future. Monitoring of sleeping breathing rates at home is recommended as the best way to screen for recurrent CHF at home.



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Elective anesthesia, fluid or steroid therapy is not advised.

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PLAN

Baseline ECG and BP are strongly recommended. Administer Lasix 1mg/kg PO q12h. Administer blood thinner Clopidogrel (Plavix) 75mg tablets; give ¼ tab orally once daily (NOTE: this medication is very bitter on the cut edges; coat in entirety). Administer Pimobendan 1.25mg PO q12h.

BREED

DSH

Recheck renal values, BP and chest radiographs in 10-14 days if able. If eating well and BP >130mmHg at recheck exam, institute benazepril or enalapril 0.5mg/kg PO q12h.

SEX

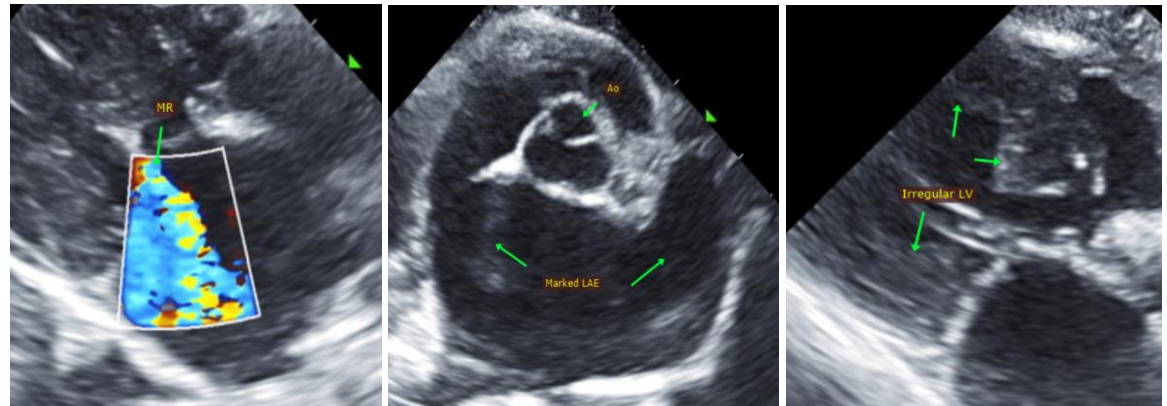
Female Spayed

A recheck echocardiogram is recommended in 6 months to assess progression.

AGE

8 years

IMAGES



WEIGHT

8.3lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

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.

IMAGING PERFORMED BY

Diane McFadden

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.

HOSPITAL NAME

Warren Animal
Hospital

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