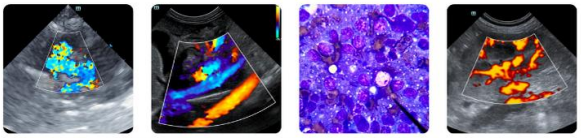

PATIENT

Penelope Schmitz

SPECIES

Feline

BREED

DSH

SEX

Female Spayed

AGE

15years

WEIGHT

9.56lbs

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY

Meghan Morse LVT, CVT

HOSPITAL NAME

All Animal Veterinary Services

REFERRING VET

Dr. Acworth

INVOICE

46893

DATE

2/18/26

PRESENTING CLINICAL SIGNS

History: Recheck echo. BP: 133, 99, 137mmHg.
-Pertinent previous echo findings (4/2025 JG): Focal septal hypertrophy, remainder NSF. IVSd: 0.50, LVWd: 0.50, LA/AO: 1.3. 1st and 2nd degree AV block noted throughout.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is irregular with mild focal septal thickening and a normal free wall. There is a mildly hyperechoic endocardium consistent with fibrosis. The papillary muscles are mildly hyperechoic. 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 appearance with no MR. No TR. Blood flow through the RVOT is normal. The blood flow through the LVOT measures normal; however, mild systolic anterior motion of the mitral valve is suspected on multimodal imaging. No AI. Aortic root is normal. No pleural or pericardial effusion seen. No obvious cardiac tumors. Irregular rhythm 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	4.3	NM	0.65	1.36	0.49	43	80
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	1.2	1.2		1.2	1.2	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

Compared to the prior report, findings are similar. Focal septal hypertrophy persists, similar to what is described previously. The LA is normal and no additional issues are seen.

The previously noted arrythmia is apparent throughout the study and an ECG should be obtained.

Given these findings, no medications are indicated. Should the degree of hypertrophy worsen, or a more significant obstruction be identified, Atenolol may be recommended in the future.

Prognosis is guarded.

PATIENT

Penelope Schmitz

SPECIES

Feline

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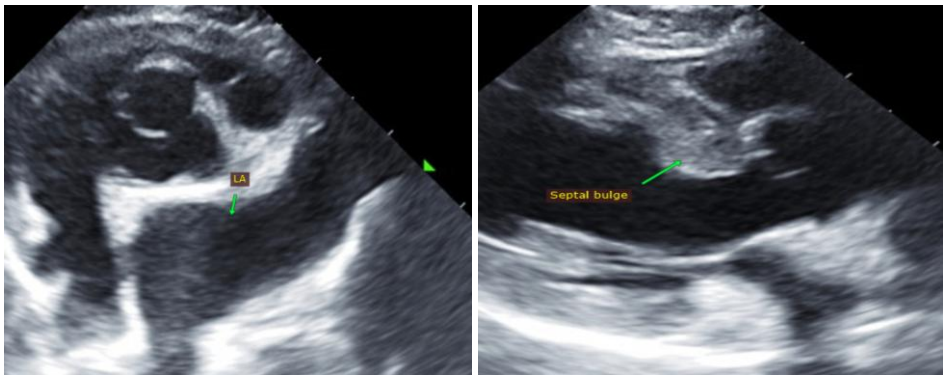
Anesthesia is not advised prior to further arrythmia evaluation.

Monitor for any development of clinical signs, including labored breathing or signs of a blood clot (paralysis, neurologic change). Prognosis is guarded prior to assessing for progression.

A recheck echocardiogram is recommended in 1 year to screen for any evidence of progression.

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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