


**PATIENT**

Knives Rabovsky

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Female Spayed

**PRESENTING CLINICAL SIGNS**

History: New murmur discovered, grade 2/6 systolic left sided. Slight increase in breathing effort seen after exam ended when seen 2 weeks ago. On arrival today cat's breathing slightly elevated. Cat had gabapentin before arrival but still agitated being in lateral recumbancy for scan, then began coughing and tachypneic. Breathing settled within minutes of being upright. Started echo but seeing the heart and pleural fluid and tachypnea sent to Urgent care and did not finish full echo.

**ECHOCARDIOGRAM FINDINGS** \* Limited exam due to patient distress

2D imaging is available. The left ventricular wall is moderately increased in dimension. Decreased LVIDd. There is a diffusely hyperechoic endocardium consistent with fibrosis. The papillary muscles are mildly hypertrophied. The endocardium also appears remodeled. The left atrium is severely dilated. The right atrium is normal in size. The right ventricle appears normal. No pericardial effusion seen. Large volume pleural effusion. No obvious cardiac tumors.

**CARDIAC CHART**
**AGE**

13 years

**WEIGHT**

9.8lbs

**INTERPRETED BY**

 Maggie Machen Lamy,  
 DVM, DACVIM  
 (Cardiology)

**IMAGING PERFORMED BY**

L. Mandeville, DVM

**HOSPITAL NAME**

BetterVet

**REFERRING VET**

Dr. Mandeville

**INVOICE**

28761

**DATE**

2/2/23

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LVWd (cm) <small>(Moise, Pipers)</small>	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.35-0.55	<2 <small>(mean 1.5)</small>	3.5-0.55	35-67	80-100
PATIENT	4.4		0.68	1.0	0.73	58	90
FELINE CARDIAC PARAMETERS	LA/AO <small>(Boon)</small>	LA/AO HEART BASE (Swe) <small>(Abbott)</small>	LA 2D short axis Base view (cm) <small>(Abbott)</small>		LVOT VEL <small>(m/s)</small>	RVOT VEL <small>(m/s)</small>	E max <small>(m/s)</small>
NORMAL	<1.5	<1.3	<1.2		<1.6	<1.3	<0.9
PATIENT	NM	2.2	1.9				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**

Hypertrophic cardiomyopathy (HCM) is a rule out diagnosis for LV hypertrophy once a patient is confirmed euthyroid and normotensive. In a senior cat, both should be considered as contributing factors, although primary disease is suspected given the severity. Regardless, the finding of significant LV hypertrophy with significant left atrial dilation confirms the origin of the respiratory signs is congestive heart failure, and immediate thoracocentesis and lifelong medications are warranted as below. As noted, this is not considered an extensive exam and murmur origin has not been examined. Consider a more complete study once the patient is stabilized.

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 should be avoided lifelong.

**SPECIES**

Feline

**PLAN**

As patient appears unstable, consider hospitalization and immediate thoracocentesis. Baseline BP and ECG.

**BREED**

DSH

Discharge on the following once stable: Institute 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). Institute Lasix 1-2mg/kg PO q12h. Institute Pimobendan 1.25mg PO q12h.

**SEX**

Female Spayed

Recheck renal values/BP in 10-14 days. If eating well and BP remains >130mmHg, institute ACEI 0.5mg/kg PO q24h. Baseline T4 and BP recommended q6mo.

\*Note: 4 medications can be overwhelming in cats. If difficult to administer, Lasix and Plavix are most important.

**AGE**

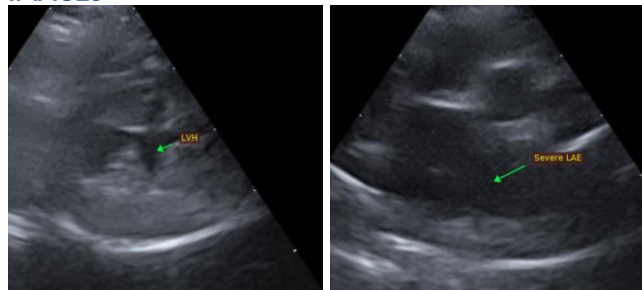
13 years

A full echocardiogram should be performed once stable.

**WEIGHT**

9.8lbs

**IMAGES**



**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**

L. Mandeville, DVM

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**

BetterVet

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