

IMAGING PERFORMED BY

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Clinical Sonography & Telecytology

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PATIENT

Barry White

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

7.13.15

WEIGHT

9.2lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Stephanie Pearce,
RDCS, RVT

HOSPITAL NAME

Docside Veterinary
Medical Center

REFERRING VET

Dr. Herling

INVOICE

22848

DATE

2.28.22

PRESENTING CLINICAL SIGNS

History: History of dental disease and grade 3 heart murmur.

-Pertinent abnormal PE/Chem/CBC/UA Results: Albumin/ Na+/Precision PSL slight elevation.

-Sedation used: Gabapentin PO.

-Pertinent previous ultrasound results: No previous.

-STAT: Not requested

-Sonographer: Stephanie Pearce RDCS, RVT.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is mildly remodeled with a focal septal thickening. The free wall measures normal. There is a mildly hyperechoic endocardium. The papillary muscles appear normal. The endocardium also appears mildly remodeled. 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 tricuspid regurgitation. Blood flow through both the LVOT and RVOT is normal in velocity. No pleural or pericardial effusion seen. No obvious cardiac tumors.

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LWVd (cm) <small>(Moise, Pipers)</small>	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	3.5-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	4.2	NM	0.63	1.3	0.46	54	88
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	1.0		1.5	0.8	NM

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

Focal septal hypertrophy is present, which may be indicative of early hypertrophic disease or may simply represent a normal variant. A screening BP and T4 are highly recommended as possible contributing issues. Regardless, the LA remains normal which would indicate clinical stability. Serial echocardiography will be necessary to determine progression and clinical significance. Additionally, the murmur is due to mild mitral regurgitation, which appears hemodynamically insignificant at this time. No additional issues are identified.

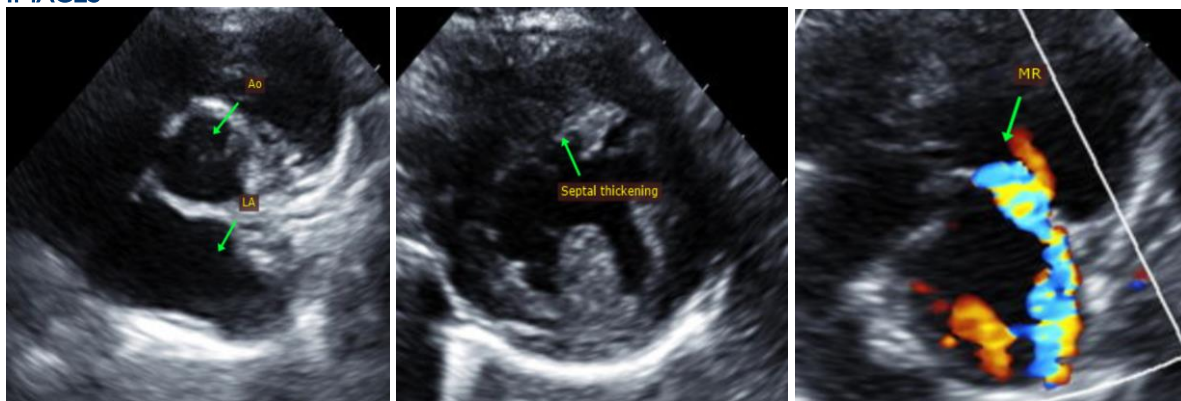
With a normal LA dimension, no medications are indicated.

Anesthetic risk is mild; however, any cat is at risk for iatrogenic IV fluid overload should they be needed in the future and monitoring is advised.

Monitor for any development of clinical signs, including labored breathing or signs of a blood clot (paralysis, neurologic change).

A recheck echocardiogram is recommended in 6-12 months 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.

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