



**PRESENTING CLINICAL SIGNS**

History: Diagnosed with aspiration pneumonia on 1/31/23, possible pleural effusion. Breathing much improved with Baytril and Clavamox.

DATE

2/3/23

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

PERFORMED BY:

Left atrial size is normal. The mitral valve is normal. There is mild symmetrical left ventricular hypertrophy. Left ventricular systolic function is mildly hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

Diane McFadden

INTERPRETED BY

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

LA/Ao - 1.20  
IVSd - 6.6 mm  
LVPWd - 6.2 mm  
LVIDd - 16.0 mm  
LVIDs - 7.3 mm  
FS - 54.4%  
LVOT - 1.07 m/s  
RVOT - 1.03 m/s

PATIENT

Jagger Bruno

**ASSESSMENT/RECOMMENDATIONS**

Hypertrophic cardiomyopathy (HCM)

SPECIES

Feline

This examination demonstrates mild hypertrophy of Jagger's left ventricular walls, consistent with the presence of HCM. The hemodynamic effects of the hypertrophy appear to be mild, as Jagger does not have secondary dilation of his left atrium. While I haven't seen Jagger's radiographs, the absence of left atrial dilation suggests that it's unlikely that there is a cardiac contribution to his recent difficulty breathing/radiographic infiltrate, especially if his respiratory rate/effort has returned to normal in the absence of cardiac therapy. Jagger's current risk for the development of cardiac thrombus formation appears to be low.

BREED

Maine Coon

SEX

No therapy appears to be warranted at this stage of disease, unless Jagger's respiratory rate/effort is still elevated and radiographs show the presence of what could be cardiogenic pulmonary edema and/or pleural effusion. If this is the case, a trial with furosemide (~1 mg/kg BID) would be warranted.

MN

AGE

A recheck echocardiogram is recommended in 6 months. Repeat thoracic radiographs are recommended any time Jagger experiences respiratory clinical signs.

5 y

WEIGHT

24 lb

HOSPITAL NAME

Sova AH

REFERRING VET

Dr. Sova





**DATE** 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.

2/3/23

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

**PERFORMED BY:**

Diane McFadden  
**Keith Blass, DVM, MS, DACVIM (Cardiology)**  
KeithBlass@gmail.com  
631-804-5754

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Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

**PATIENT**

Jagger Bruno

**SPECIES**

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