


**PATIENT**

Linus Geston

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

11 years

**WEIGHT**

13lbs

**INTERPRETED BY**

 Maggie Machen  
 Lamy, DVM, DACVIM  
 (Cardiology)

**IMAGING PERFORMED BY**

 Melissa Weisman,  
 DVM

**HOSPITAL NAME**

 Minnesota Veterinary  
 Ultrasound

**REFERRING VET**

Dr. Weisman

**INVOICE**

22332

**DATE**

2/4/22

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Doing well.

-Current medications: Methimazole 10mg tablet, 1/4 tablet every 12h, Pimobendan 5mg tablet, 1/4 tablet twice a day every 12h, Furosemide 20mg tablet, 1/4 tablet once a day, Clopidogrel 75mg tablet, 1/4 tablet once a day.

-Pertinent previous echo findings (6/2021 MML): Asymmetric LVH. IVSd: 0.55, LVWd: 0.90, FS: 34%, LA: 2.1.

**ECHOCARDIOGRAM FINDINGS \*acquired 1/25/2022**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is asymmetric with a borderline septal dimension and severe free wall thickening. There is a diffusely hyperechoic endocardium consistent with fibrosis. Symmetric papillary muscle hypertrophy. False tendon. Mild LV dysfunction. There is severe left atrial enlargement present. No obvious smoke visualized. RA/RV appear normal. There is no obvious systolic anterior motion (SAM) of the mitral valve present, with a normal LVOT velocity. There is no mitral regurgitation present. No other obvious valvular regurgitation is present. The MPA and branches are normal. There is no pericardial effusion noted. No pleural effusion appreciated. 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>	LVWd (cm) <small>(Moise, Pipers)</small>	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	5.9	150	0.54	1.6	0.87	35	68
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  (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	2.1	2.1		0.9	0.7	NM
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i> 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**

Unchanged HCM is identified in this study. The LV appearance/pathology is similar to the prior study with significant asymmetric hypertrophy. The function is unchanged and mildly depressed. The LA, while significantly dilated, is similar to the prior study without development of smoke or progressive changes. No additional issues are identified.

Given these findings, continue all medications as prescribed. Even without significant progression, risk for complication is high including CHF, development of blood clots and/or malignant arrhythmias/sudden death.

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 therapy and/or steroids remain contraindicated in this patient.

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Feline

**PLAN**

Continue Lasix, Pimobendan and Plavix as prescribed.

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DSH

Baseline BP and ECG are recommended every 4-6 months.

A recheck echocardiogram is recommended in 6-12 months to screen for progression, sooner if clinical signs arise.

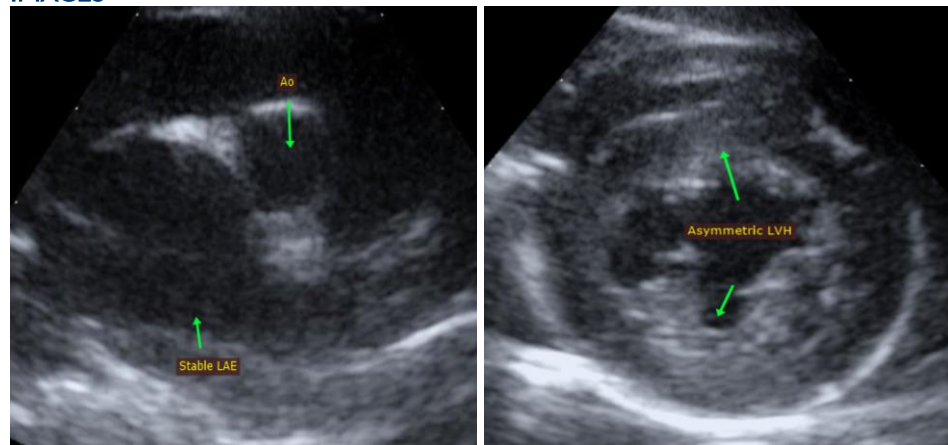
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Maggie Machen Lamy, DVM, DACVIM  
(Cardiology)

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**

Melissa Weisman, 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**

Minnesota Veterinary Ultrasound

**Maggie Machen Lamy, DVM**  
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info@sonopath.com

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