

PATIENT

Yantar Vanchision

PRESENTING CLINICAL SIGNS

History: HCM screening exam.

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is mildly increased with mildly depressed myocardial function. The LV wall thicknesses are irregular and decreased overall. There is a diffusely hyperechoic endocardium consistent with atypical fibrosis. False tendons. The papillary muscles are remodeled and hyperechoic.

BREED

Maine Coon Cat

Left atrium: The left atrium is mildly dilated; however, bulbous in appearance. No obvious smoke or thrombi seen.

SEX

Male Intact

Mitral valve: The mitral valve is normal in structure and mobility. No obvious systolic anterior motion is seen. No MR.

Aortic valve/Aorta: The aortic valve is normal. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.

AGE

9 months

Right ventricle: Normal RV.

Right atrium: Mild right atrial enlargement.

Tricuspid valve: The tricuspid valve appears normal with no tricuspid regurgitation.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

WEIGHT

17.4lbs

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

2-Dimensional Measurements

Doppler Measurements

Ao diam (cm)	1.0
LA diam (cm)	1.6
LA:Ao (Swe)	1.6
IVS thickness (cm)	0.36
LVID diastole (cm)	2.1
PW thickness (cm)	0.35
LVID systole (cm)	1.6
FS (%)	24

PV Vmax (m/s)	0.9
AoV Vmax (m/s)	1.0
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

INTERPRETATION OF THE FINDINGS

The finding of biatrial enlargement in the face of decreased LV wall thickness, exuberant fibrosis and systolic dysfunction is most consistent with Restrictive Cardiomyopathy (RCM). This is clearly unexpected in a breed screening exam and likely reflects silent congenital disease. No additional issues are identified.

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

The finding of atrial dilation and systolic dysfunction confers risk for progression in the future and use of Pimobendan (off label use) should be considered. No additional medications are indicated at this time; however, close follow-up is advised.

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Masloski

The long-term prognosis is guarded; however, there is a highly variable rate of progression in cats with subclinical disease. There will always remain risk for progression to CHF and development of blood clots in the future. Monitoring is certainly advised, particularly should any respiratory signs, collapse or significant lethargy be noted in the future.

INVOICE

22362

Breeding this animal is not advised.

DATE

2/4/22



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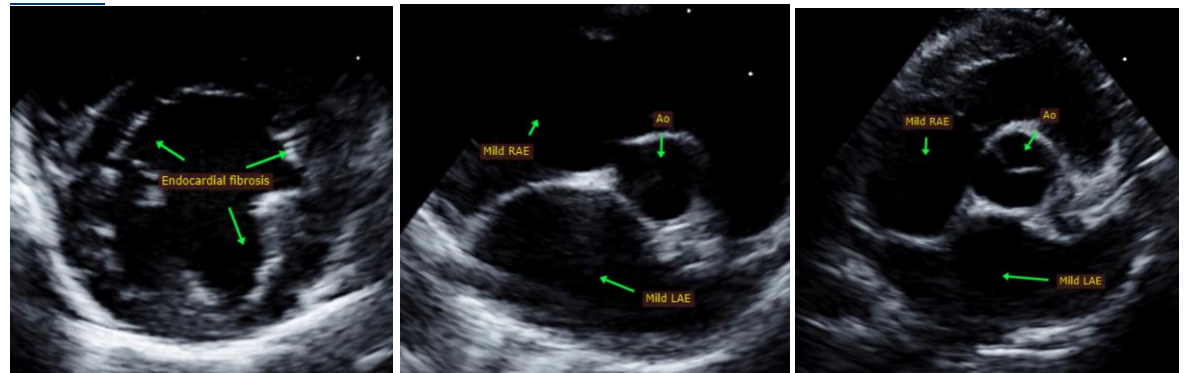
RECOMMENDATIONS

- Recommend institute Pimobendan (off label use) 1.25mg PO q12h.
- Breeding this animal is contraindicated. Consider sterilization.
- Anesthetic risk is considered moderately elevated, and judicious IV fluid rates are advised to avoid fluid overload. Additionally, drugs that stimulate heart rate should be avoided unless clinically necessary (glycopyrrolate, atropine). Avoid vasodilators as this may worsen the obstruction. A reasonable protocol includes opioid/benzodiazepine premedication, propofol induction, isoflurane maintenance. Additionally, steroids and/or fluid therapy should be avoided lifelong unless absolutely necessary.
- Monitor for any clinical evidence of cardiac compromise, including respiratory changes, collapse and/or signs of a blood clot event (paralysis, neurologic changes, etc.).

PLAN

- Recheck echocardiogram in 6 months, sooner if clinical signs arise.

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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Echocardiogram performed by: Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)