



PATIENT

Bernice Burdick

SPECIES

Feline

BREED

DMH

SEX

Female Spayed

AGE

10 years

WEIGHT

5.2lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Kim Liedberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

Dr. Weidman

INVOICE

28843

DATE

2/7/23

PRESENTING CLINICAL SIGNS

History: Long-term daily sneezing/nasal discharge. Drastic weight loss over last few days. Back legs seem weak/wobbly when walking. Congested/possible URI. New grade 3/6 heart murmur noted. -Abnormal PE/Chem/CBC/UA Results: WBC 54.9 BUN 123, Cr 3.5, Phos 7.9 SDMA 29, K 2.9 low.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is borderline to mildly increased in dimension with a decreased chamber size (most consistent with pseudohypertrophy). There is a diffusely hyperechoic endocardium consistent with fibrosis. The endocardium also appears remodeled. The left atrium is normal to small. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal with no obvious MR. No TR. Blood flow through the LVOT appears normal. Flow through the RVOT is normal. No effusions or tumors are identified.

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	LVWd (cm) (Moise, Pipers)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	2.4	190	0.57	0.73	0.60	60	90
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	1.1	1.0	1.0		1.2	1.2	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

Overtly normal geriatric cardiac structure and function with evidence of volume depletion/dehydration. Serial echocardiography will be necessary to determine progression/regression once patient is volume stabilized. The LA is normal, indicating low risk for complication. No structural issues are identified. No cause of the murmur is appreciated in this study, making it likely physiologic secondary to volume depletion as well.

Given these findings no medications are indicated. Prognosis is open.

No cardiac contraindication for general anesthesia. If fluid therapy is indicated for renal disease, recommend monitor RR/RE at home. However nothing in this study should deter from fluid resuscitating a patient with significant azotemia, despite a mild risk for overload. No obvious contraindication for steroid therapy, however any senior cat should be monitored for intolerance (changes in RR/RE).

PLAN

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1-800-838-4268 info@sonopath.com SonoPath.com

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A baseline BP is strongly recommended in any patient with CKD.

A recheck echocardiogram is recommended in 6-12 months to assess for any progressive changes, sooner if clinical issues arise.

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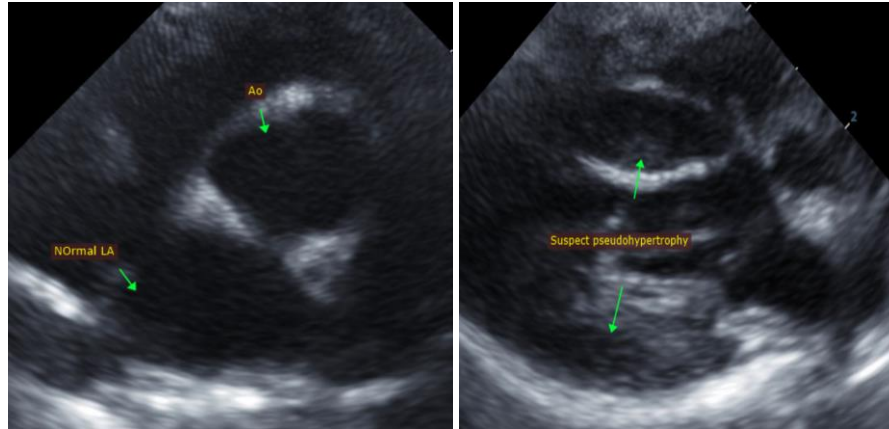
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IMAGES



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. 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
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

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