



**PRESENTING CLINICAL SIGNS**

**DATE** History: Seen recently for instability in hind end, concern for possible clot. Murmur ausculted. Later suspected to be arthritis-related and started on solensia. Has been doing well since.

2/9/23

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**

Dr. Meredith Swart

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

Left atrial size is normal. There is mild hypertrophy of the left ventricular posterior wall. Left ventricular internal dimensions are normal. Left ventricular systolic function is mildly hyperdynamic. There is systolic anterior motion (SAM) of the mitral valve leaflets creating mild dynamic obstruction to flow in the left ventricular outflow tract, with mild secondary mitral regurgitation. 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 pericardial effusion or cardiac masses are seen.

**PATIENT**

Kitty Madar

LA - 14.4 mm  
LA/Ao - 1.40  
IVSd - 4.8 mm  
LVPWd - 6.6 mm  
LVIDd - 14.8 mm  
LVIDs - 6.8 mm  
FS - 54%  
RA - 8.5 mm  
LVOT - 2.57 m/s  
RVOT - 0.89 m/s

**SPECIES**

Feline

**ASSESSMENT/RECOMMENDATIONS**

**BREED**

Hypertrophic obstructive cardiomyopathy (HOCM)

**DSH**

This examination demonstrates mild hypertrophy of Kitty's left ventricular posterior wall, consistent with the presence of an asymmetric form of HCM. Associated with her hypertrophy, Kitty has systolic anterior motion (SAM) of her mitral valve leaflets, which is creating mild dynamic obstruction to flow in her left ventricular outflow tract. The hemodynamic effects of Kitty's cardiac disease appear to be fairly mild at present, as she does not have secondary dilation of her left atrium, indicating that her current risk for the development of congestive heart failure and/or thromboembolic disease appears to be fairly low.

**SEX**

FS

No therapy is recommended at this stage of disease.

**AGE**

14 y

A recheck echocardiogram is recommended in 6 months. Thoracic radiographs are recommended if Kitty experiences respiratory clinical signs.

**WEIGHT**

13.5 lb

**HOSPITAL NAME**

Swart Veterinary  
Imaging

**REFERRING VET**

Dr. Swart



DATE

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PATIENT

Kitty Madar

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.

SPECIES

Feline

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.

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

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DSH

SEX

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