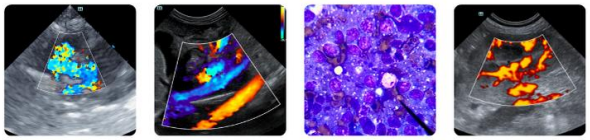

PATIENT

Leo Sidhu

SPECIES

Feline

BREED

Bengal

SEX

Male

AGE

9 months

WEIGHT

11.38lbs

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY

Joanne Goodman, DVM

HOSPITAL NAME

Evendale-Blue Ash Pet Hospital

REFERRING VET

Dr. Goodman

INVOICE

47197

DATE

3/11/26

PRESENTING CLINICAL SIGNS

History: Grade 2-3/6 heart murmur. Asymptomatic. Assess prior to anesthesia for neuter.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall thickness is borderline for this signalment. There is a mildly hyperechoic endocardium. Mild papillary muscle remodeling. The right ventricle is subjectively normal in size and morphology. There is slight left atrial enlargement present. No right atrial enlargement present. Normal RVOT velocity. No TR. Normal LVOT velocity. There is no obvious systolic anterior motion (SAM) of the mitral valve; however, this is not ruled out. No MR. There is no pericardial or pleural effusion appreciated. No obvious cardiac tumors.

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	5.2	NM	0.56	1.1	0.55	50	86
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	NM	1.5	1.4		1.1	1.0	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

The only abnormality identified is the LV thickness and LA dimension are borderline increased for this signalment. This may be indicative of early hypertrophic disease or may simply represent a normal variant (the latter being supported by a normal BNP value). Regardless, the findings are mild overall. Serial echocardiography will be necessary to determine progression and clinical significance. No cause for the murmur is identified, suggesting a physiologic origin is likely. No additional pathology is identified.

With a normal LA dimension, no medications are indicated.

Prognosis is open prior to assessing for progression.

Anesthetic risk is low. Mild IV fluid restriction is advised.

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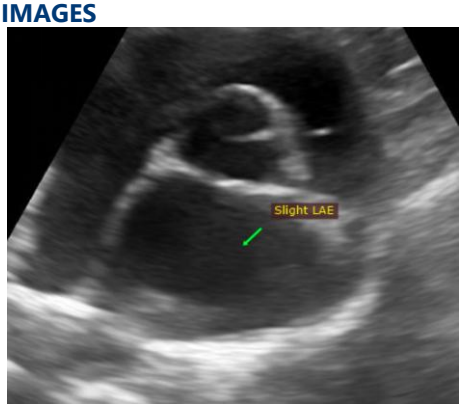
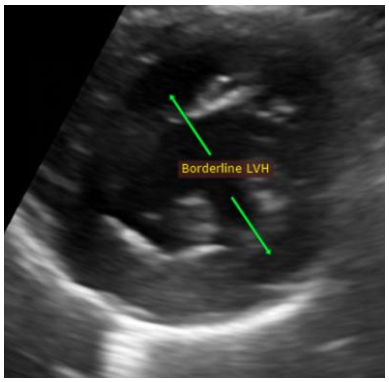
Monitor for any development of clinical signs, including labored breathing or signs of a blood clot (paralysis, neurologic change).

PLAN
A recheck echocardiogram is recommended in 6-12 months to screen for any evidence of progression.

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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