



PRESENTING CLINICAL SIGNS

DATE

3/15/23

History: Hx of lungworm pneumonia. Recently experienced open mouth breathing, yowling, and stress after getting spooked. Radiographs show moderate generalized cardiomegaly and pulmonary infiltrates suspicious for cardiogenic edema. Started on furosemide 6.25 mg TID. BNP abnormal.

ECHOCARDIOGRAPHIC FINDINGS

PERFORMED BY:

Dr. Brian Barnes

2D, M-mode, and Doppler study.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

There is mild left atrial dilation. The mitral valve appears normal, though mild mitral regurgitation is present. The majority of the interventricular septum and left ventricular posterior wall are normal in thickness, however, there is hypertrophy of the apical myocardium of the left ventricle. There is mild left ventricular dilation. Left ventricular systolic function is normal. The aorta and aortic valve appear normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonary are normal. No pericardial effusion or cardiac masses are seen.

ECG during echo: Sinus rhythm

PATIENT

Pumpkin Korosec

LA/Ao - 1.70
IVSd - 3.5 mm
LVPWd - 3.8 mm
LVIDd - 19.8 mm
LVIDs - 12.1 mm
FS - 38.9%
LVOT - 0.85 m/s
RVOT - 0.75 m/s

SPECIES

Feline

ASSESSMENT/RECOMMENDATIONS

BREED

Hypertrophic cardiomyopathy (HCM)

DSH

This examination demonstrates hypertrophy of the apical portion of Pumpkin's left ventricle, consistent with an asymmetric variant of HCM. Secondary to his hypertrophy, Pumpkin has mild dilation of both his left atrium and left ventricle. Given the presence of mild left atrial dilation, it's certainly possible that the infiltrate seen in Pumpkin's radiographs could be cardiogenic in origin, especially if his respiratory rate/effort improves with diuretic therapy.

SEX

MN

Continued use of furosemide (1-2 mg/kg BID) is recommended at this time, as is therapy with enalapril (1.25 mg BID) and clopidogrel (18.75 mg SID).

AGE

6 y

Recheck radiographs and a renal/electrolyte profile are recommended in 1 week. A recheck echocardiogram is recommended in 6 months.

WEIGHT

4.2 kg

HOSPITAL NAME

Westview VH

REFERRING VET

Dr. Barnes



DATE

3/15/23

PERFORMED BY:

Dr. Brian Barnes

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

PATIENT

Pumpkin Korosec

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

6 y

WEIGHT

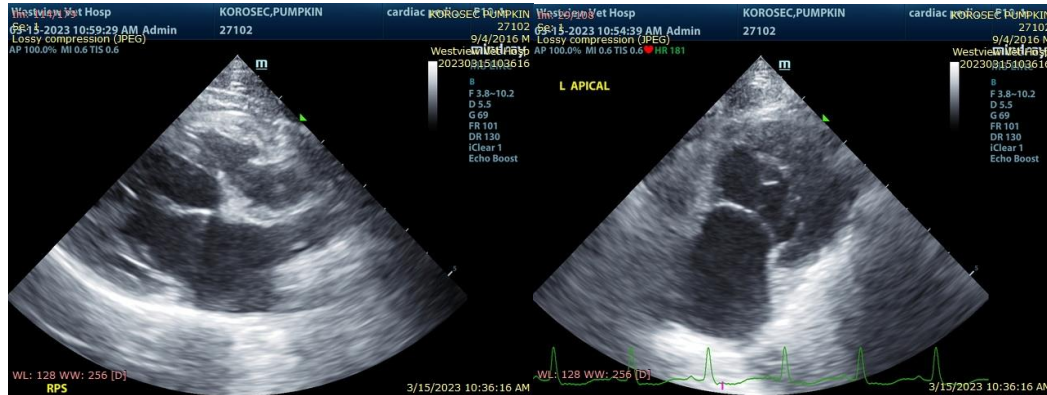
4.2 kg

HOSPITAL NAME

Westview VH

REFERRING VET

Dr. Barnes



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.

Keith Blass, DVM, MS, DACVIM (Cardiology)

KeithBlass@gmail.com

631-804-5754