



**PATIENT**

Deus Bueker

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

12 years

**WEIGHT**

14.44lbs

**INTERPRETED BY**

Maggie Machen  
Lamy, DVM  
DACVIM (Cardiology)

**IMAGING**

**PERFORMED BY**

Pamela Harrigan,  
RDCS

**HOSPITAL NAME**

Mass Veterinary  
Services

**REFERRING VET**

Dr. Masloski

**INVOICE**

23122

**DATE**

3/16/22

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. History normal cardiac structure and function on serial echocardiograms. History isolated VPCs. Currently, Deus is doing well with a good appetite and energy level. Grade I-II/VI murmur. BP: 100mmHg x 5. Medications: Atenolol 25 mg, 1/4-tab BID.  
-Pertinent previous echo findings (1/11/21 MML): LA 1.3 cm; LA:Ao 1.2; LV 1.4 cm; IVS 0.47 cm; PW 0.47 cm.

**ECHOCARDIOGRAM FINDINGS**

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

**Left ventricle:** The LV diameter is normal with adequate myocardial function. The LV wall thicknesses are normal. There is a diffusely hyperechoic endocardium consistent with fibrosis. The papillary muscles are hypertrophied and hyperechoic. The endocardium appears mildly remodeled.

**Left atrium:** The left atrium is normal in dimension. No smoke or thrombi seen.

**Mitral valve:** The anterior leaflet of the mitral valve appears normal with no Systolic anterior motion noted. Trace MR.

**Aortic valve/Aorta:** The aortic valve is normal in morphology and mobility. Increased aortic outflow velocity with a dynamic profile. No aortic insufficiency.

**Right ventricle:** Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

**Right atrium:** The right atrium is normal in dimension.

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

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

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

**Heart rhythm:** ECG reveals a sinus rhythm with an average HR of 180bpm.

**2-Dimensional Measurements**

Ao diam (cm)	1.1
LA diam (cm)	1.3
LA:Ao (Swe)	1.3
IVS thickness (cm)	0.49
LVID diastole (cm)	1.36
PW thickness (cm)	0.48
LVID systole (cm)	0.56
FS (%)	59

**Doppler Measurements**

PV Vmax (m/s)	0.73
AoV Vmax (m/s)	0.72
MR Vmax (m/s)	NM
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

**INTERPRETATION OF THE FINDINGS**

Normal cardiac structure and function persists in this study. No evidence of LV hypertrophy or elevated LA pressure. No additional issues are identified.

Reasonable to continue Atenolol lifelong, given the unusual history.

Prognosis remains open.



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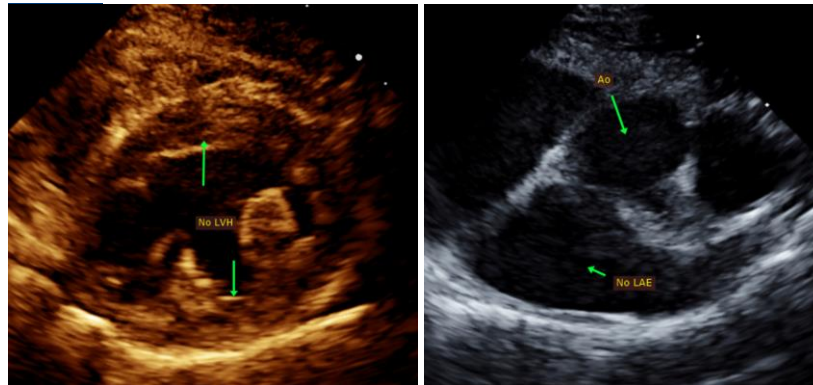
**RECOMMENDATIONS**

- Continue atenolol as prescribed.
- No additional medications are indicated.
- No cardiac contraindication for general anesthesia. Mild IV fluid restriction is advised.
- Monitor for any clinical evidence of cardiac compromise, including respiratory changes and/or signs of a blood clot event (paralysis, neurologic changes, etc.).

**PLAN**

- Recommend recheck echocardiogram annually to continue to screen for development of disease.

**IMAGES**



**INTERPRETED BY**

Maggie Machen  
Lamy, DVM  
DACVIM (Cardiology)

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.

**IMAGING PERFORMED BY**

Pamela Harrigan,  
RDCS

**Maggie Machen Lamy, DVM**  
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)  
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**HOSPITAL NAME**

Mass Veterinary Services

Echocardiogram performed by:

Pamela Harrigan, RDCS  
Pet Animal Ultrasound Service (4paus.com)

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