



PATIENT

June Ortega

PRESENTING CLINICAL SIGNS

History: Presented for acute hind-limb paralysis – 1 week duration. PE consistent with a saddle thrombus.

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. There is a diffusely hyperechoic endocardium consistent with mild fibrosis. Decreased LV chamber dimension. False tendon. The papillary muscles are mildly remodeled and hyperechoic. The endocardium also appears remodeled. The left atrium is normal in size. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility. Trace MR. Blood flow through both the LVOT and RVOT is normal in velocity. Trace TR. No pleural or pericardial effusion seen. No obvious cardiac tumors.

BREED

DSH

SEX

Female Spayed

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	LWVd (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	3.1	200	0.41	1.1	0.44	70	97
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	1.0	0.9		0.8	0.6	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.*

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY

G. Ferrer, DVM

HOSPITAL NAME

Paseos Veterinary Center

REFERRING VET

Dr. Ferrer

INVOICE

23182

DATE

3/18/22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

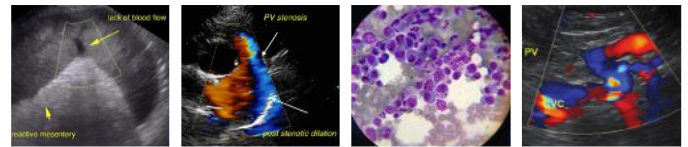
Essentially normal cardiac structure and function are documented in this study. The LV wall thickness is normal and there is no evidence of elevated left atrial pressure. The LV chamber is decreased, which may suggest volume depletion and baseline lab work is strongly recommended. Trace MR and TR are hemodynamically insignificant. There is mild remodeling and fibrosis of the left ventricular wall, which is likely a normal variant. No additional issues are identified.

Given these findings, the clinical issues are unlikely to be cardiac-related (i.e., low risk of a cardiac thrombus with a normal left atrium); however, this does not rule out non-cardiac thrombi etc. Further systemic evaluation is advised to rule out underlying issues such as neoplasia.

From a structural standpoint, anesthetic risk is considered mild.

PLAN

No indication for medications from a cardiac standpoint. That being said, Plavix is reasonable until further evaluation is performed.



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Recommend recheck echocardiogram in 1 year to assess any progressive issues, sooner if a murmur develops in the interim.

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AGE

5 years

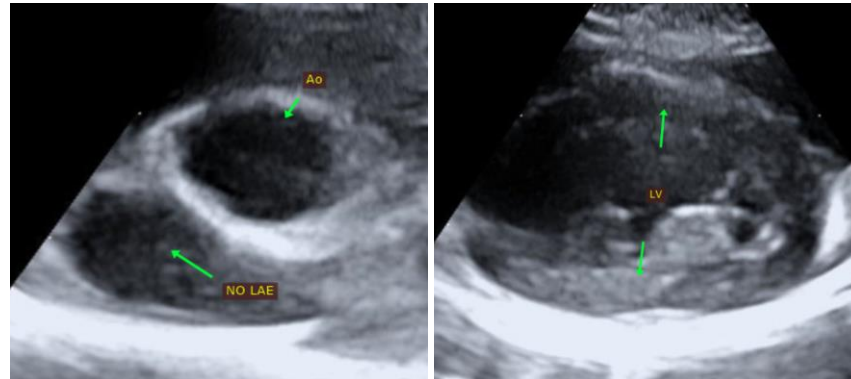
WEIGHT

6.8lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

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.

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