


PATIENT PRESENTING CLINICAL SIGNS

Jet Borda
 History: Recheck echo.
 -Current medications: Pimobendan 1.25mg BID and methimazole 2.5mgs BID.
 -Pertinent previous echo findings (10/2021 MML): Mild LVE. FS: 40%, LVIDd: 1.7. Severe LAE: 2cm. Mild MR, moderate RAE, scant PCE.

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

13 years

WEIGHT

17lbs

INTERPRETED BY

 Maggie Machen Lamy,
 DVM DACVIM
 (Cardiology)

IMAGING PERFORMED BY

Kelly Reschny, RVT

HOSPITAL NAME

 Ho Ho Kus Veterinary
 Hospital

REFERRING VET

Dr. Eisenberg

INVOICE

23223

DATE

3/23/22

ECHOCARDIOGRAM FINDINGS

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

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LVWd (cm) <small>(Moise, Pipers)</small>	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	7.7	120	0.45	1.7	0.45	32	64
FELINE CARDIAC PARAMETERS	LA/AO <small>(Boon)</small>	LA/AO HEART BASE (Swe) <small>(Abbott)</small>	LA 2D short axis Base view (cm) <small>(Abbott)</small>		LVOT VEL <small>(m/s)</small>	RVOT VEL <small>(m/s)</small>	E max <small>(m/s)</small>
NORMAL	<1.5	<1.3	<1.2		<1.6	<1.3	<0.9
PATIENT	NM	1.7	1.62		1.0	0.84	NM
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i> 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

Mild improvement is seen in this study. While the LV is similar to previous, both the LA and RA enlargement have improved likely due to adequate thyroid/HR control. Mild to moderate LA dilation persists; however, risk for complication is decreased compared to the previous study. The MR is unchanged, and no additional issues are identified.

Given these findings, it is reasonable to continue Pimobendan as previously recommended. Additionally, Plavix remains recommended if the patient is easily medicated, due to left atrial enlargement. No obvious indication for diuretics at this time. My hope is that maintaining adequate thyroid status will result in persistently stable disease; however, lifelong monitoring is advised.



PATIENT

Jet Borda

Going forward, there will always remain risk for recurrent CHF, development of additional blood clots, and/or malignant arrhythmias/sudden death in the future. Monitoring of sleeping breathing rates at home is recommended as the best way to screen for recurrent/impending CHF at home.

SPECIES

Feline

Monitor at home for any progressive labored breathing and/or signs of clot recurrence (limb paralysis, neurologic changes, etc.).

BREED

DSH

PLAN

Continue Pimobendan as prescribed. Consider Plavix as previously recommended. Continue adequate thyroid control.

SEX

Male Neutered

Recheck echocardiogram is recommended in 6 months.

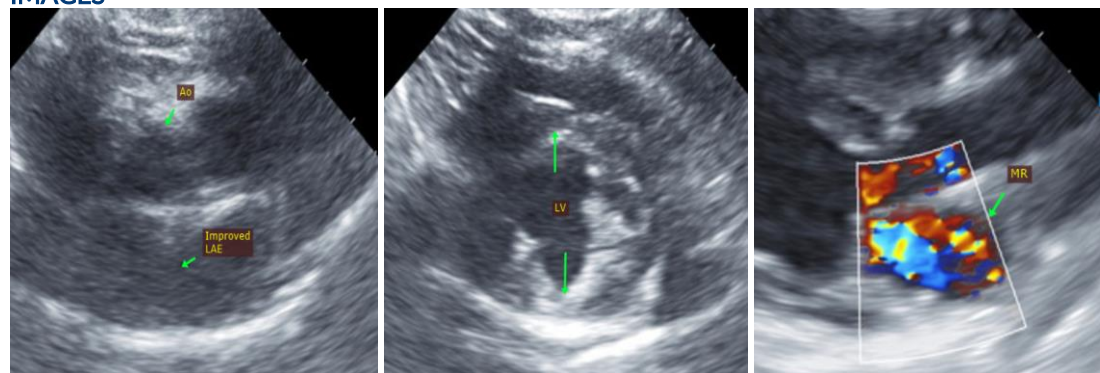
AGE

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IMAGES



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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.

IMAGING PERFORMED BY

Kelly Reschny, RVT

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.

HOSPITAL NAME

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