



**PATIENT**

Katja Tacker

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Female Spayed

**AGE**

3.24.10

**WEIGHT**

9.4lbs

**PRESENTING CLINICAL SIGNS**

History: Heart murmur noted during exam for dental.  
 -Current medications: None listed.  
 -Blood pressure: 120mmHg.  
 -Sedation used: Not required to complete full diagnostic ultrasound.  
 -Pertinent previous ultrasound results: No previous.  
 -STAT: Not requested.  
 -Imaging performed by: Stephanie Warga RDCS, RVT.

**RADIOGRAPHIC FINDINGS \*NOTE: Images submitted for supplemental information only.**

Normal cardiac silhouette. No obvious evidence of CHF.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall thickness is normal with significant irregularity. There is a mildly hyperechoic endocardium with regions of irregularity. The left ventricular chamber is normal in dimension. The papillary muscles appear normal. 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. There is trivial mitral regurgitation present. Mild tricuspid regurgitation identified. Normal TR velocity. Blood flow through both the LVOT and RVOT are normal in velocity. No effusions or cardiac tumors are identified.

**CARDIAC CHART**

**INTERPRETED BY**  
 Maggie Machen Lamy,  
 DVM, DACVIM  
 (Cardiology)

**HOSPITAL NAME**  
 Animal Emergency  
 Hospital

**REFERRING VET**  
 Dr. Goessling

**INVOICE**  
 29823

**DATE**  
 3.24.23

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	3.5-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	4.3	NM	0.43	1.1	0.44	41	77
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	1.3	1.1		0.93	0.6	NM

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

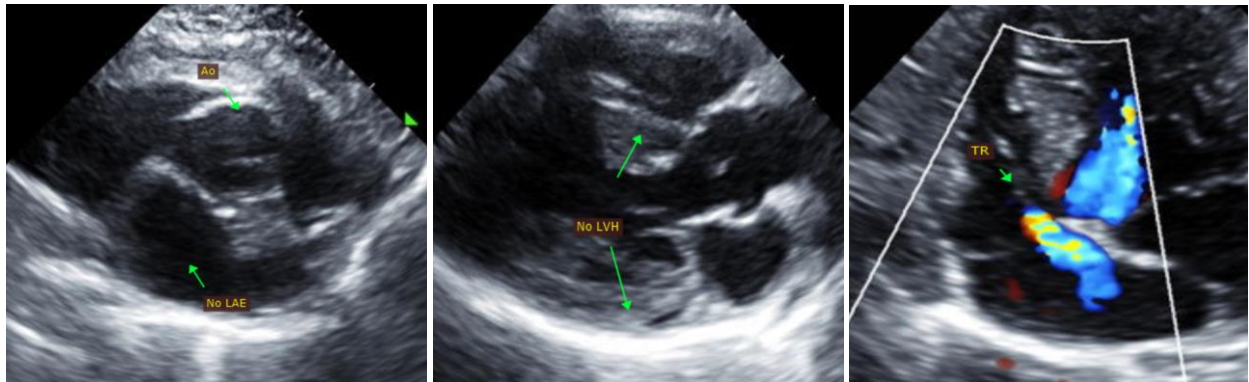
The only abnormality identified is mild tricuspid regurgitation. TR in cats is most often physiologic, with little progression or clinical relevance. The left heart is largely normal with mild remodeling and fibrosis, which is likely an age-related variant. Both atria are normal, indicating low risk for complication. No additional issues are noted.

No cardiac contraindication for anesthesia at this time.

No medications are indicated. Monitor in the future for respiratory compromise, syncope/lethargy, or signs of a blood clot (paralysis, lameness).

Recommend recheck echocardiogram in 12 months to screen for 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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