



PATIENT

Gatsby Lavorata

SPECIES

Feline

BREED

DSH

SEX

Male Intact

AGE

8 months

WEIGHT

8.9lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING

PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Services

REFERRING VET

Dr. Masloski

INVOICE

23354

DATE

3/30/22

PRESENTING CLINICAL SIGNS

History: Gatsby was noted to have a heart murmur in February. He is eating well, active and playful. Echocardiogram prior to anesthesia for neutering. On auscultation: NSR, grade I-II/VI parasternal murmur, PSS, lung fields clear, compressible thorax. BP: 110mmHg x 5. *No sedation.

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 mild fibrosis. The papillary muscles appear normal. The endocardium appears mildly remodeled.

Left atrium: The left atrium and auricle are mildly dilated. No spontaneous contrast or thrombi seen.

Mitral valve: The anterior leaflet of the mitral valve is mildly elongated. Abnormal anterior motion is seen during systole; however, an LVOTO is only intermittently appreciated. Moderate eccentric mitral regurgitation.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal LVOT outflow velocity on Spectral; however, an intermittent LVOTO is appreciated on color flow and 2D imaging. 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 mildly dilated.

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 166bpm.

2-Dimensional Measurements

Ao diam (cm)	0.8
LA diam (cm)	1.4
LA:Ao (Swe)	1.7
IVS thickness (cm)	0.42
LVID diastole (cm)	1.48
PW thickness (cm)	0.45
LVID systole (cm)	0.63
FS (%)	57

Doppler Measurements

PV Vmax (m/s)	1.1
AoV Vmax (m/s)	1.6
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

INTERPRETATION OF THE FINDINGS

The diagnosis and cause of the murmur is mitral valve dysplasia leading to an obstructive LVOT flow pattern and mild MR. What is unusual in this case is the LVOTO is only intermittently appreciated, and there is no LVH. Despite this, there is mild left and right atrial enlargement which is unexpected. Regardless, this would suggest there may be risk for progression to spontaneous CHF and/or a thrombotic event going forward. No additional issues are identified.

With typical mitral valve dysplasia in cats, Atenolol is indicated to decrease the LVOT obstruction and relieve LV pressure overload. This would be of unknown benefit in this case, given a lack of LV hypertrophy; however, if the patient is easily medicated there is likely no harm in instituting this medication. Discussion with the owner is advised. An



PATIENT
Gatsby Lavorata

alternative approach would be to reassess in 6 months and screen for any progressive changes.

SPECIES
Feline

Long term prognosis is guarded given the age of the patient and highly variable nature of subclinical feline heart disease. Many cats will remain asymptomatic until mid-life or beyond, while others develop CHF within the first years. Close monitoring for progression of LA dilation in the future will help determine long term prognosis.

BREED
DSH

RECOMMENDATIONS

- If elected, administer titrating dose of atenolol: 25mg tablets; Give ¼ tab once daily. Recheck heart rate in 1-2 weeks with target stressed rate of 140-160bpm 12-24 hours post-administration. Increase as needed until target reached.

SEX
Male Intact

- Anesthetic risk is considered mildly elevated, however judicious IV fluid rates are advised to avoid fluid overload. Additionally, drugs that stimulate heart rate should be avoided unless clinically necessary (glycopyrrolate, atropine). Avoid vasodilators as this may worsen the obstruction. A reasonable protocol includes opioid/benzodiazepine premedication, propofol induction, isoflurane maintenance.

AGE
8 months

- Monitor for any clinical evidence of cardiac compromise, including respiratory changes and/or signs of a blood clot event (paralysis, neurologic changes, etc.).

WEIGHT
8.9lbs

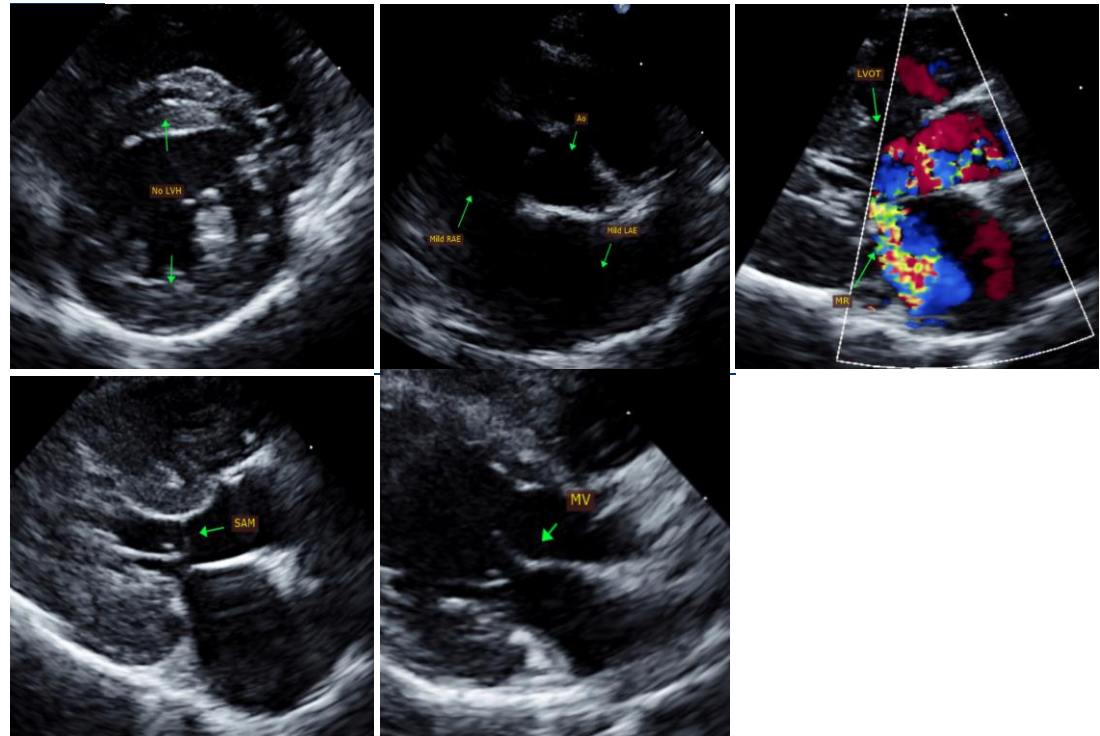
PLAN

- Recommend recheck echocardiogram in 6 months to assess for progression/regression, sooner if clinical signs arise in the interim.

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGES



IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Masloski

INVOICE

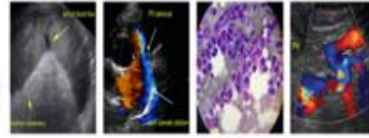
23354

DATE

3/30/22



Mass Veterinary
Services



SonoPath
Clinical Sonography & Telectology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Gatsby Lavorata

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.

SPECIES

Feline

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.

BREED

DSH

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

SEX

Male Intact

Echocardiogram performed by: Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)

AGE

8 months

WEIGHT

8.9lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Services

REFERRING VET

Dr. Masloski

INVOICE

23354

DATE

3/30/22