


**PATIENT**

Spooklet Lee

**PRESENTING CLINICAL SIGNS**

 History: Grade 5/6 heart murmur. Concern for bladder/urethral tumor. BP: 180, 182, 180mmHg.  
 -Current medications: Amlodipine 1.25mg/ml 0.5ml BID.

**SPECIES**

Feline

**RADIOGRAPHIC FINDINGS** \*NOTE: Images submitted for supplemental cardiac information only.  
 Normal cardiac silhouette. No obvious evidence of CHF.

**BREED**

DMH

**ELECTROCARDIOGRAPHIC FINDINGS**

A six lead ECG is available at 50mm/s; 10mm/mV. The average heart rate is 190bpm with a largely regular rhythm. The rhythm is sinus in origin, with a p for every QRS complex and vice versa. The P wave morphology is positive with a normal dimension. Normal PR. The QRS morphology is positive with normal dimension. MEA is normal. No ectopic beats, pauses or dysrhythmias observed.

**SEX**

Female Spayed

ECG diagnosis: Normal sinus rhythm.

**AGE**

16.6 years

**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 age-related fibrosis. Minimal remodeling. The papillary muscles are hyperechoic. 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. No MR. The tricuspid valve appears normal in structure and mobility. No TR. Blood flow through both the LVOT and RVOT are normal in velocity. No effusions. No obvious cardiac tumors.

**WEIGHT**

8.6lbs; 3.9kgs

**INTERPRETED BY**

 Maggie Machen Lamy,  
 DVM, DACVIM  
 (Cardiology)

**CARDIAC CHART**
**IMAGING PERFORMED BY**

 Loetitia St-Jacques,  
 LVT/RVT

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LWVd (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	3.9	NM	0.47	1.3	0.47	60	92
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	1.1	1.0	1.3	1.1	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 &amp; 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.

**HOSPITAL NAME**

 Mountain View  
 Animal Hospital

**REFERRING VET**

Dr. Kalivoida

**INVOICE**

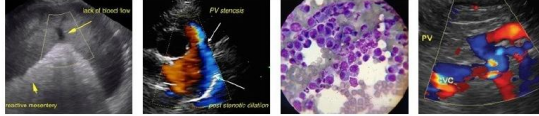
29525

**DATE**

3/9/23

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Overtly normal geriatric cardiac structure and function. Mild fibrosis of the left ventricular wall is noted, which is likely a normal age-related variant. No significant valve leaks are noted, and flow through the great vessels is normal in velocity. No definitive cause is identified for the murmur in this study, making it likely physiologic in origin (i.e., secondary to tachycardia, volume changes, etc.). It is always somewhat disconcerting to have a grade 5 murmur without an obvious cause. If



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this is a consistent exam finding, referral should be considered in this case. The ECG is unremarkable with a normal sinus rhythm.

**SPECIES**

Feline

The history mentions elevated blood pressure despite being on Amlodipine. A dose adjustment may be warranted, depending on serial readings.

Given these findings and a normal LA dimension, no medications are indicated.

**BREED**

DMH

No cardiac contraindication for general anesthesia. Should fluid or steroid therapy be indicated in the future, any cat should be monitored for intolerance (changes in RR/RE).

**SEX**

Female Spayed

Monitor at home for signs of cardiac compromise, including respiratory changes and/or signs of a blood clot event (paralysis, neurologic changes).

**AGE**

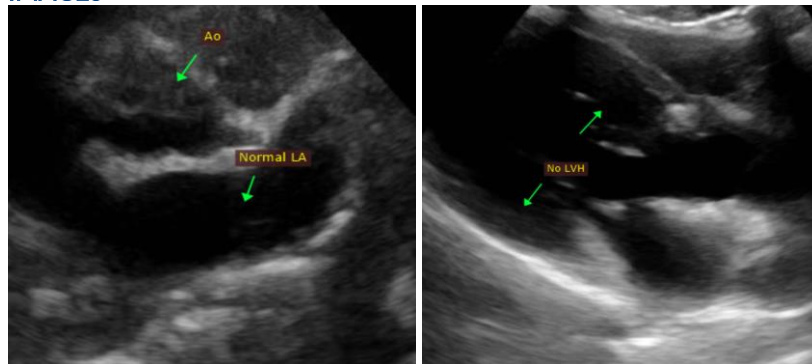
16.6 years

Recommend recheck echocardiogram in 1 year to assess for any progressive issues or development of disease the pre-existing murmur may mask.

**WEIGHT**

8.6lbs; 3.9kgs

**IMAGES**



**INTERPRETED BY**

Maggie Machen Lamy, DVM, DACVIM (Cardiology)



**IMAGING PERFORMED BY**

Loetitia St-Jacques, LVT/RVT

**HOSPITAL NAME**

Mountain View Animal Hospital

**REFERRING VET**

Dr. Kalivoida

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.

**INVOICE**

29525

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.

**DATE**

3/9/23

Maggie Machen Lamy, DVM  
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