



PATIENT

Heidi Escavich

SPECIES

Feline

BREED

DSH

SEX

Female Spayed

AGE

8 years

WEIGHT

12.75lbs

PRESENTING CLINICAL SIGNS

History: Recheck echo. History perimembraneous VSD with left to right shunt; no left ventricular volume overload. Presently, Heidi is doing well at home with a good appetite and normal activity level. On exam: NSR, grade III/VI murmur noted best on sternum, PSS, lung fields clear, compressible thorax, mm pink, moist, CRT<2. BP: 140 mmHg x 5. *No sedation for study.

-Pertinent previous echo findings (8/11/21 MML): LA 1.1 cm; LA:Ao 0.8; LV 1.7 cm; IVS 0.4 cm; PW 0.44 cm; normal chamber sizes, VSD Vmax 5.5 m/s.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is borderline increased with adequate myocardial function. LV wall thicknesses are normal. A small perimembraneous ventricular septal defect (VSD) is visualized. The flow is left to right; max velocity 5.2m/s.

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is normal with no mitral regurgitation.

Aortic valve/aorta: The aortic valve is normal in morphology and mobility. Prominent aortic root. Normal aortic outflow velocity; laminar flow. Mild aortic insufficiency.

Right ventricle: The RV appears normal with no evidence of hypertrophy.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears normal with no tricuspid regurgitation.

Pulmonic 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.

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

2-Dimensional Measurements

Ao diam (cm)	1.2
LA diam (cm)	1.3
LA:Ao (Swe)	1.1
IVS thickness (cm)	0.47
LVID diastole (cm)	1.75
PW thickness (cm)	0.46
LVID systole (cm)	1.1
FS (%)	39

Doppler Measurements

PV Vmax (m/s)	1.2
AoV Vmax (m/s)	1.2
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

IMAGING

PERFORMED BY

Pamela Harrigan,
RDCS

INTERPRETATION OF THE FINDINGS

Compared to the prior study, findings are similar. The VSD remains left to right with stable left heart dimensions. The aortic insufficiency is similar to previous, and the blood pressure is reasonable. No additional issues have developed.

HOSPITAL NAME

Mass Veterinary Services

REFERRING VET

Dr. Masloski

Given these findings, no medications are warranted. Assessment of progression in the future will help predict long term prognosis, which is generally good with this size defect. Most small congenital shunts are able to live a normal life free of medications.

INVOICE

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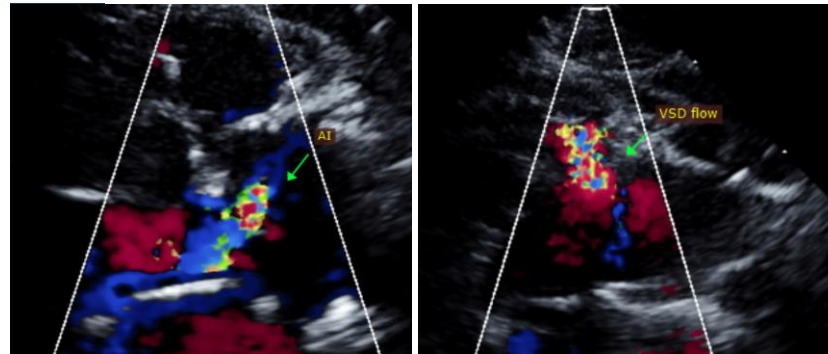
RECOMMENDATIONS

- No medications are indicated.
- No cardiac contraindication for general anesthesia. Mild IV fluid restriction is advised.
- Monitor BP every 6 months life-long.
- Monitor for any breathing change, signs of a blood clot event, or collapse episodes going forward.

PLAN

- Recommend conservative monitoring with a recheck echocardiogram annually, sooner if clinical signs arise.

IMAGES



INTERPRETED BY

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.

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.

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

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

HOSPITAL NAME

Mass Veterinary Services

Echocardiogram performed by:

Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)

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Dr. Masloski

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