



PATIENT

Kevin Bacon Sammies Friends

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

11 years

WEIGHT

10.5lbs; 4.7kgs

INTERPRETED BY

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY

Loetitia St-Jacques, LVT/RVT

PRESENTING CLINICAL SIGNS

History: Presented for lethargy. Patient had fever and increased lung sounds. Moderate cardiomegaly; no CHF seen on CXR. BP: 130mmHg. Normal ECG.
-Abnormal PE/Chem/CBC/UA Results: Mild NNN anemia with HCT @ 27%; platelets clumped but adequate; 2+ proteinuria, but 3+ hematuria noted; all other values WNL. T4 well within normal limits @ 1.0 ug/dL.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. The LV is normal in dimension. There is a mildly hyperechoic endocardium consistent with fibrosis. The papillary muscles are remodeled with regions of atrophy. The left atrium is moderately dilated and bulbous in appearance. No obvious smoke. The right atrium is moderately dilated. The right ventricle appears prominent. The mitral valve is mildly thickened with mild MR. No TR seen. Blood flow through both the LVOT and RVOT is normal in velocity. No pericardial or pleural effusion. No obvious cardiac tumors.

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	LVWd (cm) (Moise, Pipers)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	4.7	NM	0.49	1.6	0.49	38	70
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	1.8	1.76	0.92	0.98	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 & 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 finding of significant biatrial enlargement in the face of normal LV wall thickness and intact function is most consistent with Unclassified Cardiomyopathy (UCM); however, some prior infectious or inflammatory insult to the myocardium, or end-stage HCM can also have this appearance. There is also mild LV remodeling and fibrosis which indicates diastolic dysfunction. MR is secondary to annular stretch and is of little hemodynamic significance. Most importantly, both atria are enlarged, putting the patient at risk for decompensation.

Regardless of categorical classification, the finding of this degree of atrial dilation puts the patient at high risk for spontaneous congestive heart failure, and medications should be considered as below. The patient has nonspecific clinical signs; however, no CHF was noted on the films making this unlikely and Lasix is not clearly necessary. The patient is also anemic with proteinuria and further systemic evaluation/treatment is certainly recommended.

HOSPITAL NAME

Brighton Greens Veterinary Hospital

REFERRING VET

Dr. Murphy

INVOICE

30224

DATE

4/12/23



PATIENT

Kevin Bacon Sammies
Friends

The mean survival time for cats with severe disease is <1 year; however, most are able to maintain a good quality of life on medications. There will always remain risk for recurrent episodes of CHF, development of 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 CHF at home.

SPECIES

Feline

PLAN

Further systemic evaluation and treatment is likely warranted. No indication to Lasix therapy prior to clinical signs consistent with CHF. If any change in RR/RE develops institute Lasix 1-2mg/kg PO q12h.

BREED

DSH

If able, institute blood thinner Clopidogrel (Plavix) 75mg tabs; Give ¼ tab by mouth every 24 hours (NOTE: bitter along cut edge, may cause foaming at the mouth; coat in entirety). Institute off label Pimobendan 1.25mg PO q12h. Once doing well on these medications, normotensive and eating well at home, institute vasodilator ACE-I (benazepril or enalapril) 0.5mg/kg PO q12h.

SEX

Male Neutered

A recheck echocardiogram is recommended in 6 months to assess progression.

AGE

11 years

IMAGES

WEIGHT

10.5lbs; 4.7kgs



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.

IMAGING PERFORMED BY

Loetitia St-Jacques,
LVT/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

Brighton Greens
Veterinary Hospital

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

REFERRING VET

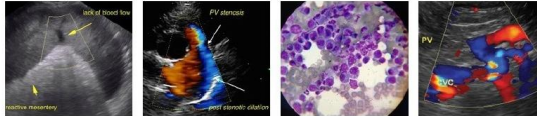
Dr. Murphy

INVOICE

30224

DATE

4/12/23



Portable Animal Western Sonography, Inc.

IMAGING PERFORMED BY
pawsonography@gmail.com  530-786-8340

PATIENT

Kevin Bacon Sammies
Friends

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

11 years

WEIGHT

10.5lbs; 4.7kgs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

**IMAGING
PERFORMED BY**

Loetitia St-Jacques,
LVT/RVT

HOSPITAL NAME

Brighton Greens
Veterinary Hospital

REFERRING VET

Dr. Murphy

INVOICE

30224

DATE

4/12/23