



PATIENT

Stewie Drake

SPECIES

Feline

BREED

Sphynx

SEX

Male Neutered

AGE

3 years

WEIGHT

8.7lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Jessican Bailes, DVM

HOSPITAL NAME

All Creatures Great &
Small Veterinary Clinic

REFERRING VET

Dr. Sadahiro

INVOICE

47405

DATE

4/2/26

PRESENTING CLINICAL SIGNS

History: Breed screen exam. Asymptomatic.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is largely normal. There is a mildly hyperechoic endocardium with significant remodeling. The LV chamber is borderline increased, adequate function. The papillary muscles are normal in size and hyperechoic. The endocardium appears normal. The left atrium is borderline enlarged. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility. No MR or TR. Normal flow through both the RVOT and LVOT. No aortic or pulmonic insufficiency. No pleural or pericardial effusion seen. 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	3.9	NM	0.48	1.55	0.42	42	80
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	1.5	1.3	1.4		1.4	1.0	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 only abnormality identified is borderline LA and LV dimensions with an increased remodeling overall. This is somewhat unexpected in a three-year-old cat and monitoring is advised. No significant LV hypertrophy is seen, and the remainder of the study is unremarkable.

Given these findings, no medications are indicated. It is important to note that phenotypic HCM can develop at any phase of life in cats (particularly in this predisposed breed) and often does not accompany a heart murmur or PE abnormalities. A BNP may be helpful to help raise or lower index of suspicion.

No cardiac contraindication for general anesthesia at this time. Mild IV restriction is advised.

Recommend recheck echocardiogram in 1 year, sooner if any clinical signs arise.



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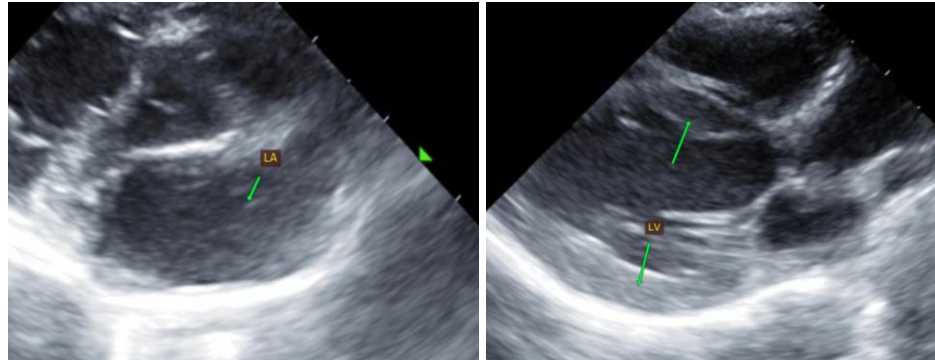
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IMAGES



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.

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