



PATIENT

Mazzi Perantinos

SPECIES

Feline

BREED

Oriental SH

SEX

Male Neutered

AGE

6 years

WEIGHT

10.3lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

IMAGING PERFORMED BY

Kelly Reschny, RVT

HOSPITAL NAME

East Credit Veterinary
Hospital

REFERRING VET

Dr. Webster

INVOICE

30450

DATE

4/26/23

PRESENTING CLINICAL SIGNS

History: Recheck echo.

-Pertinent previous echo findings (5/2022 MML): Irregular LV without LVH, significant fibrosis, severe LAE: 1.9cm, mild RAE, mild MR. Suspect U/RCM. Recommend Lasix, Plavix and Pimobendan +/- ACE-I.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal to decreased in dimension with an irregular appearance. There is a mildly hyperechoic endocardium consistent with fibrosis. The LV is moderately dilated with mildly depressed myocardial function. Atypical fibrosis tissue seen within the LV. The papillary muscles are mildly remodeled. The left atrium is markedly dilated and bulbous in appearance. The right atrium is mildly increased in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility. Moderate MR. No TR. Blood flow through both the LVOT and RVOT is normal in velocity. No pleural or pericardial effusion seen. No obvious cardiac tumors. Tachycardia throughout.

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LVWd (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	4.7	240	0.47	2.2	0.45	36	70
FELINE CARDIAC PARAMETERS	LA/AO <small>(Boon)</small>	LA/AO HEART BASE <small>(Swe) (Abbott)</small>	LA 2D short axis Base view (cm) <small>(Abbott)</small>	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	>3.0	2.9	2.5	1.1	0.6	NM	
<p><i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i> 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.</p>							

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Compared to the prior study, there is evidence of progression. The LA is markedly enlarged, with risk for decompensation. The LV chamber is also increased comparatively with development of systolic dysfunction. **Finally, a tachyarrhythmia is suspected and an ECG is strongly recommended.**

Given these findings, full cardiac support is recommended as was previously discussed. No clinical signs are mentioned; however, this patient is at high risk for acute CHF and/or blood clot events going forward.

The mean survival time is <6months; however, most cats are able to maintain a good quality of life on medications. There will always remain risk for progression to CHF and



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development of blood clots in the future. Monitoring of sleeping breathing rates at home is recommended as the best way to screen for CHF at home.

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Elective anesthesia, fluid or steroid therapy is not advised.

BREED

Oriental SH

PLAN

Baseline ECG is strongly recommended. Administer Lasix 1-2mg/kg PO q12h. Administer blood thinner Clopidogrel (Plavix) 75mg tablets; give ¼ tab orally once daily (NOTE: this medication is very bitter on the cut edges). Administer Pimobendan 1.25mg PO q12h. If BP is >130mmHg, administer ACE-I 0.5mg/kg PO q12h.

SEX

Male Neutered

Recheck renal values and BP every 3-4 months lifelong.

AGE

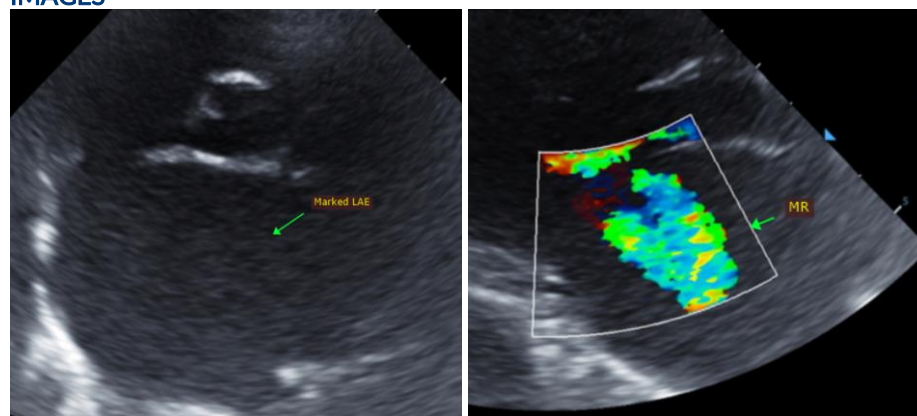
6 years

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

WEIGHT

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IMAGES



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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

Kelly Reschny, 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

East Credit Veterinary
Hospital

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