


PATIENT

Little O Guzman

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

14 years

WEIGHT

17.6lbs

INTERPRETED BY

 Maggie Machen Lamy,
 DVM, DACVIM
 (Cardiology)

IMAGING PERFORMED BY

Kelly Vazquez, CVT

HOSPITAL NAME

 Animal General on
 Hudson

REFERRING VET

Dr. Zelinski

INVOICE

23924

DATE

4/27/22

PRESENTING CLINICAL SIGNS

History: Recheck echo. Mild fever and lethargy a few days ago.

-Pertinent previous echo findings (8/2021 MML): Borderline LVH, mild LVOTO, no LAE. IVSd: 0.58, LVWd: 0.59, LA: 1.0, AV max: 2.2.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is borderline normal in dimension. There is a diffusely hyperechoic endocardium consistent with fibrosis and remodeling. The endocardium also appears mildly remodeled. The MV appears normal. An obstruction is not captured on 2D; however, color flow and Spectral doppler are consistent. Mild eccentric MR, secondary to SAM. The left atrium is normal in size. The right atrium is normal in size. The right ventricle appears normal. Blood flow through the RVOT is normal in velocity. Trace AI. There is no pleural or pericardial effusion seen. There are 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	8.0	140	0.53	1.5	0.55	50	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	1.2	1.2		2.2	1.3	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

Compared to the prior study, there is no evidence of significant progression. The LVOTO is similar to previous and appears mild overall. A small aortic leak is noted, which was not previously documented, and a baseline blood pressure is strongly recommended. The LV wall thickness remains borderline and unchanged and the LA normal. No additional issues are identified.

Given these findings, no medications remain indicated. Continued follow up is advised as any progression may warrant Atenolol therapy.

Anesthetic risk is currently low. Avoid heart rate stimulating drugs (atropine, glycopyrrolate) unless clinically necessary. Avoid vasodilators such as acepromazine as this can worsen obstruction. Judicious IV fluid rates are recommended to avoid fluid overload in this patient with diastolic dysfunction.

PLAN

Baseline BP and T4 are recommended every 6 months.



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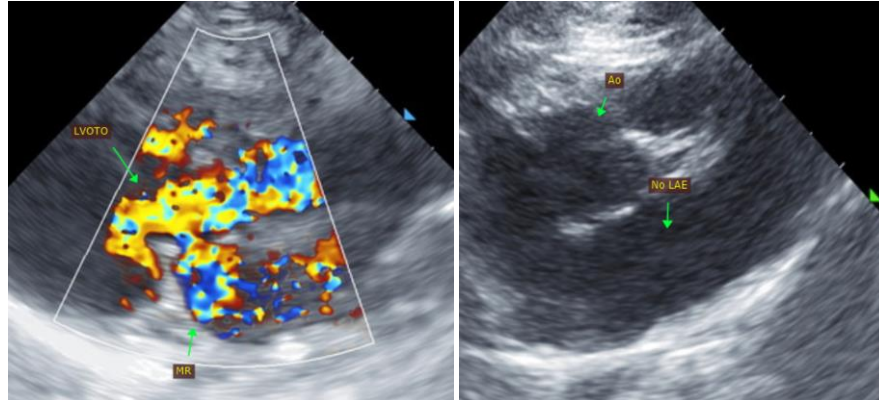
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A recheck echocardiogram is recommended in 6-12 months, sooner if any clinical signs arise.

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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