



DATE	RESENTING CLINICAL SIGNS
4/6/22	History: Previous echos showed TVD, PH, and a possible VSD. Receiving sildenafil 4 mg TID and clopidogrel 18.75 mg SID. PCV 43%. Doing well.
PERFORMED BY:	ECHOCARDIOGRAPHIC FINDINGS
Loetitia Saint-Jacques, RVT, LVT	2D, M-mode, and Doppler study. This exam is compared to the one performed 11/9/21.
INTERPRETED BY	There is mild left atrial dilation. The mitral valve appears normal, though trace mitral regurgitation is present. Left ventricular wall thickness is normal. There is mild left ventricular dilation. Left ventricular systolic function is normal. There is turbulent flow in the left ventricular outflow tract, suggestive of the presence of a left-to-right shunting perimembranous ventricular septal defect. The aorta and aortic valve are normal. There is moderate right atrial and mild right ventricular dilation. The tricuspid valve leaflets are thickened, and there is Doppler evidence of tricuspid regurgitation present. TR velocity is consistent with the presence of severe pulmonary hypertension (111 mmHg / prev. PG 108 mmHg). The pulmonary artery and pulmonic valve appear normal, though there is increased flow velocity in the main pulmonary artery. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.
Keith Blass, DVM, MS, DACVIM (Cardiology)	
PATIENT	ASSESSMENT/RECOMMENDATIONS
Starfruit NHS	Tricuspid valve dysplasia (TVD)
SPECIES	Pulmonary hypertension
Feline	Ventricular septal defect (VSD)
BREED	
DSH	
SEX	
FS	
AGE	This examination is similar to the one performed five months ago, with the exception that Starfruit now has mild dilation of her left heart chambers, likely secondary to her VSD flow. As only mild dilation is present, Starfruit's current risk for the development of left-sided congestive heart failure still appears to be relatively low, though careful monitoring of her respiratory rate/effort is recommended. Given the continued presence of severe pulmonary hypertension and moderate right heart chamber dilation, Starfruit continues to be at high risk for the development of right-sided congestive heart failure, pulmonary thromboembolism, and/or arrhythmia formation, therefore, careful monitoring for signs associated with these conditions is recommended.
10 mo	
WEIGHT	I recommend adding enalapril (1.25 mg BID) to Starfruit's current therapy with sildenafil and clopidogrel.
8.4 lb	
HOSPITAL NAME	
Nevada Humane Society	A renal/electrolyte profile is recommended in 1-2 weeks. A recheck echocardiogram is recommended in 4-6 months. Thoracic/abdominal radiographs are recommended if clinical signs suggestive of the presence of pulmonary edema, pleural and/or peritoneal effusion develop.
REFERRING VET	
Dr. Slatin	



DATE

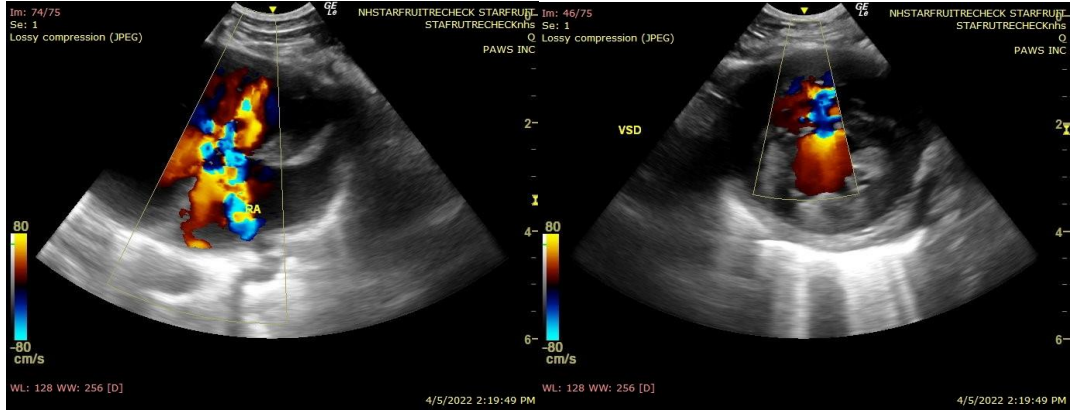
4/6/22

PERFORMED BY:

Loetitia Saint-Jacques, RVT, LVT

INTERPRETED BY

Keith Blass, DVM, MS, 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.

PATIENT

Starfruit NHS

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

SPECIES

Keith Blass, DVM, MS, DACVIM (Cardiology)

Feline

KeithBlass@gmail.com
631-804-5754

BREED

DSH

SEX

FS

AGE

10 mo

WEIGHT

8.4 lb

HOSPITAL NAME

Nevada Humane Society

REFERRING VET

Dr. Slatin