



PATIENT

Suzi Q Reifsnyder

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

10 y

WEIGHT

10.3 lb

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Amy Alivernini, VMD

HOSPITAL NAME

Gilbertsville VH

REFERRING VET

Dr. Arms

INVOICE

DATE

4/8/26

PRESENTING CLINICAL SIGNS

Anorexia. Fell on floor and cried out a week ago. PE – muffled heart sounds, suspect murmur and gallop sound. CXR – suspected cardiomegaly, pleural effusion. BNP abnormal.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

There is mild left atrial dilation. The mitral valve appears normal, though mild mitral regurgitation is present. Left ventricular wall thickness is normal. There is mild left ventricular dilation. Left ventricular systolic function is severely depressed. The aorta and aortic valve are normal. There is mild right atrial dilation. Right ventricular dimensions are normal. The tricuspid valve appears normal, though mild to moderate tricuspid regurgitation is present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen. Mild pleural effusion is visible.

ECG during echo: Sinus rhythm

LA/Ao – 1.78

IVSd – 3.7 mm

LVPWd – 3.5 mm

LVIDd – 17.9 mm

LVIDs – 15.8 mm

FS – 11.7%

RA – 15.2 mm

LVOT – 0.61 m/s

RVOT – 0.26 m/s

TR – 1.96 m/s

ASSESSMENT/RECOMMENDATIONS

Dilated cardiomyopathy (DCM)

This examination demonstrates severe depression of Suzi Q's left ventricular systolic function, consistent with the presence of DCM. Secondary to her dysfunction, Suzi Q has mild dilation of her left atrium, left ventricle, and right atrium. Given these findings, it's likely that Suzi Q's pleural effusion is the result of the development of congestive heart failure (CHF). In addition to CHF, Suzi Q is at risk for cardiac thrombus formation with secondary thromboembolic disease, as well as arrhythmia formation, therefore, careful monitoring for these is recommended.

A whole blood taurine level is recommended, and taurine supplementation (250 mg BID) should be given if a deficiency is documented. Ensuring that Suzi Q is receiving a traditional grain-based diet that is not high in peas, lentils, and/or legumes is also recommended.

Recommended medical therapy based on this exam includes furosemide (5 mg BID), enalapril (1.25 mg BID), pimobendan (1.25 mg BID), and clopidogrel (18.75 mg SID).

Thoracic radiographs and a renal/electrolyte profile are recommended in 1 week. A recheck echocardiogram is recommended in 6 months.



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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Keith Blass, DVM, MS, DACVIM (Cardiology) info@SonoPath.com