


PATIENT

Ruby Bruce

PRESENTING CLINICAL SIGNS

History: Grade 2 heart murmur noted on physical exam. Clinically well. May be used for breeding.

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. The papillary muscles are normal in size and hyperechoic. The endocardium appears normal. The left atrium is normal in size. The right atrium is prominent. The right ventricle appears prominent; no RVH. The mitral valve is thickened; trace MR with no obvious SAM appreciated on color flow imaging; 2D is suggestive. Normal flow through both the RVOT and LVOT. Trace TR. No obvious AI or PI. No pleural or pericardial effusion seen. No obvious cardiac tumors.

BREED

Siamese

SEX

Female

CARDIAC CHART
AGE

4 months

WEIGHT

4.4lbs

INTERPRETED BY

 Maggie Machen Lamy,
 DVM, DACVIM
 (Cardiology)

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	LWVd (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	2.0		0.39	1.2	0.39	58	90
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	1.0		1.3	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.

IMAGING PERFORMED BY

 Jacquie Pankatz,
 DVM

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Mild abnormalities are appreciated, including a prominent right heart and mildly thickened MV. SAM is not appreciated on color flow or Spectral doppler; however, trace MR and the appearance of the valve on 2D imaging is suspicious. Regardless, the LV wall thickness is normal and there is no evidence of elevated left atrial pressure. No obvious additional congenital issues are documented.

HOSPITAL NAME

 Mountain Vista
 Veterinary Hospital

While these findings may represent a normal variant, in a 4 month old kitten follow up is advised. No cause for the murmur is identified, and reassessing for MV dysplasia is recommended going forward prior to breeding. No cause for the RA/RV prominence is seen, making this of unknown relevance. Recommend reassess patient in 4-6 months to screen for any progressive issues. As an alternative, an OFA exam can be sought by an attending Cardiologist as the gold standard breed screening exam.

REFERRING VET

Dr. Pankatz

INVOICE

24176

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. Periodic screening is ideally recommended in all cats.

DATE

5/12/22



PATIENT

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No cardiac contraindication for general anesthesia at this time.
Recommend recheck echocardiogram in 4-6 months to reassess murmur origin and mild abnormalities.

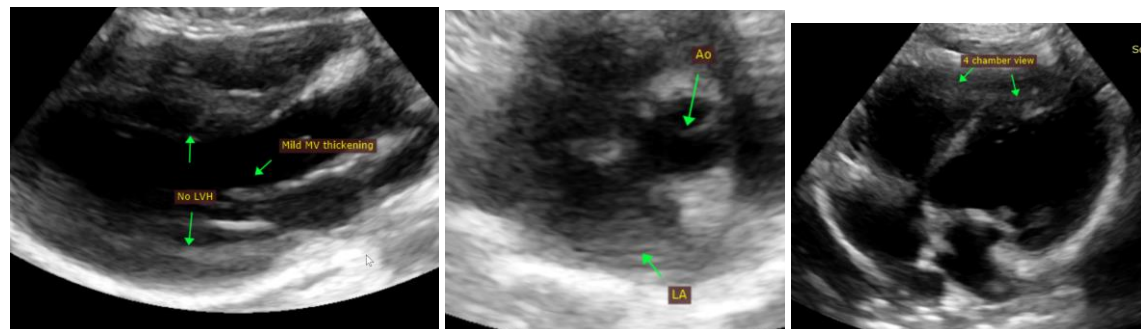
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IMAGES

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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.

WEIGHT

4.4lbs

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.

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

Maggie Machen Lamy, DVM
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

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Jacque Pankatz,
DVM

HOSPITAL NAME

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