


PATIENT

Kory Knox

PRESENTING CLINICAL SIGNS

 History: Recheck echo. Grade 2/6 heart murmur.
 -Current medications: Atenolol 6.25mg PO q24h.
 -Blood pressure: 126mmHg. HR: 150bpm.

SPECIES

Feline

Pertinent previous echo findings (MML 11/2021): MV dysp LVOT 2.1cm IVSd 0.55, LVPWd 0.56cm, LA 1.1

BREED

DMH

SEX

Male Neutered

AGE

13 months

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is borderline with no significant hypertrophy. There is a diffusely hyperechoic endocardium with regions of remodeling. The right ventricle is normal. There is no left atrial enlargement present. No right atrial enlargement present. Normal RVOT velocity, however color Doppler is suggestive of a dynamic obstruction. Abnormal anterior motion of the mitral valve is seen on 2D; no LVOTO on color flow or spectral Doppler. The anterior leaflet of the MV is elongated and thickened, consistent with dysplasia. There is no obvious mitral regurgitation present. No other obvious valvular regurgitation is present. There is no pericardial effusion noted. No pleural effusion appreciated.

CARDIAC CHART
WEIGHT

12lbs

INTERPRETED BY

 Maggie Machen Lamy,
 DVM DACVIM
 (Cardiology)

IMAGING PERFORMED BY

Crystall Hill, RVT

HOSPITAL NAME

 Hawkins Animal
 Hospital

REFERRING VET

Dr. Hawkins

INVOICE

24181

DATE

5/13/22

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	5.4	147	0.55	1.5	0.55	49	84
FELINE CARDIAC PARAMETERS	LA/AO <small>(Boon)</small>	LA/AO HEART BASE (Swe) <small>(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	1.1	1.1	1.0		0.64	0.74	NM
<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.							

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Stable disease. The LVOTO appears well controlled on atenolol, without progression in LV dimensions. The LA remains normal, indicating the risk of spontaneous CHF and/or a thrombotic event is currently low. No additional issues are identified.

Continue atenolol as prescribed with no additional medications indicated.

Monitor at home for any respiratory signs or evidence of blood clot events (neurologic change, paralysis, etc.).

Long term prognosis is guarded given the age of the patient and highly variable nature of asymptomatic feline heart disease. Many cats will remain asymptomatic until mid-life or



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beyond. Close monitoring for progression of LA dilation in the future will help determine long term prognosis.

SPECIES

Feline

Anesthetic risk is considered mild, however judicious IV fluid rates are advised to avoid fluid overload. Additionally, **drugs that stimulate heart rate should be avoided unless clinically necessary (glycopyrrolate, atropine)**. Avoid vasodilators as this may worsen the obstruction. A reasonable protocol includes opioid/benzodiazepine premedication, propofol induction, isoflurane maintenance. Additionally, steroids should be used with caution in cats, as even a 'normal' heart can develop evidence of intolerance and fluid retention.

BREED

DMH

SEX

Male Neutered

PLAN

Continue atenolol as prescribed.

AGE

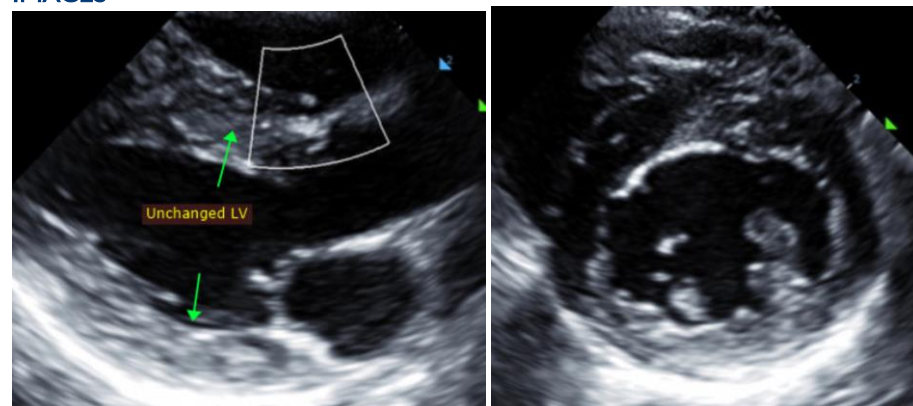
13 months

Recommend recheck echocardiogram in 12 months to assess for progression, sooner if clinical issues arise.

WEIGHT

12lbs

IMAGES



INTERPRETED BY

Maggie Machen Lamy,
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

Crystall Hill, RVT

HOSPITAL NAME

Hawkins Animal
Hospital

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.

REFERRING VET

Dr. Hawkins

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