



## PATIENT

Daltrey Smith

## SPECIES

Feline

## BREED

DSH

## SEX

MN

## AGE

15 y

## WEIGHT

6.8 kg

## PRESENTING CLINICAL SIGNS

Grade II/VI left parasternal systolic murmur.

## ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

Left atrial size is normal. The mitral valve appears normal, though mild mitral regurgitation is present. Left ventricular wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No heartworms are visualized. No pericardial effusion or cardiac masses are seen.

LA/Ao – 1.36

IVSd – 5.1 mm

LVPWd – 5.0 mm

LVIDd – 12.5 mm

LVIDs – 7.2 mm

FS – 42.4%

LVOT – 1.27 m/s

RVOT – 0.85 m/s

## INTERPRETED BY

Keith Blass, DVM, MS,  
DACVIM (Cardiology)

## ELECTROCARDIOGRAPHIC FINDINGS

A six lead ECG is submitted for review.

HR: 194 bpm

Rhythm: Sinus

## IMAGING PERFORMED BY

Sara Hansen

Normal sinus rhythm is present throughout this recording. There is a left-axis deviation. All complex amplitudes and intervals are within normal limits. No premature beats or conduction blocks are seen.

## HOSPITAL NAME

Faithful Friends AC

## ASSESSMENT/RECOMMENDATIONS

## REFERRING VET

Dr. Villanueva

Daltrey's echocardiogram demonstrates mild regurgitation of blood across his mitral valve. The hemodynamic effects of the regurgitation also appear to be mild, as Daltrey does not have secondary dilation of either of his left heart chambers. As such, Daltrey's current risk for the development of congestive heart failure and/or thromboembolism appears to be low.

## INVOICE

The left-axis deviation seen in Daltrey's ECG appears to be a normal variant.

No therapy is recommended based on these exams.

## DATE

5/21/26

A recheck echocardiogram is recommended in 9 months, sooner if new clinical signs compatible with cardiac dysfunction (ex. labored breathing, collapse, limb paralysis) develop.



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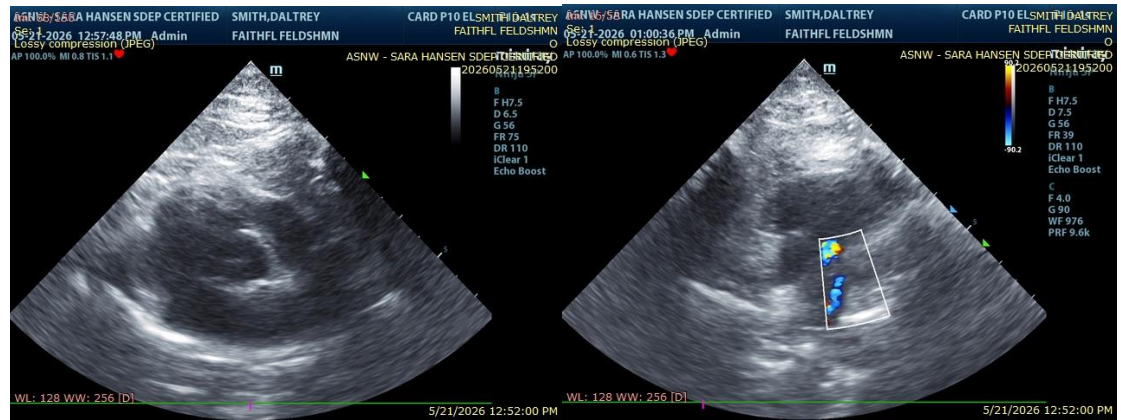
### REFERRING VET

Dr. Villanueva

### INVOICE

### DATE

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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](mailto:info@SonoPath.com)