


RESENTING CLINICAL SIGNS

History: Presented for abdominal respirations. Radiographs show cardiomegaly and pleural effusion. Receiving furosemide 12.5 mg BID.

DATE

5/3/23

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Kelly Vazquez

There is mild to moderate left atrial dilation. No spontaneous contrast or thrombi are visualized in the left auricle. The mitral valve is normal. There is mild hypertrophy of the left ventricular posterior wall. 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 pulmonary are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

LA/Ao – 1.84
 IVSd – 5.0 mm
 LVPWd – 6.3 mm
 LVIDd – 12.3 mm
 LVIDs – 6.7 mm
 FS – 45.5%
 LVOT – 1.00 m/s
 RVOT – 0.90 m/s

PATIENT

Perdido Zachary

SPECIES

Feline

ASSESSMENT/RECOMMENDATIONS

This examination demonstrates mild hypertrophy of Perdido's left ventricular posterior wall, which is likely consistent with the presence of hypertrophic cardiomyopathy (HCM), though both systemic hypertension and hyperthyroidism should be ruled out as possible contributing factors. Secondary to his hypertrophy, Perdido has mild to moderate dilation of his left atrium. Given the presence of mild to moderate left atrial dilation, it's likely that Perdido's pleural effusion is the result of the development of congestive heart failure (CHF). In addition to CHF, Perdido is at risk for thromboembolic disease and arrhythmia formation, therefore, careful monitoring for the development of clinical signs associated with these conditions is recommended.

BREED

DSH

SEX

MN

Thoracocentesis is recommended to rapidly remove Perdido's pleural effusion, and a sample of effusion should be submitted for analysis.

AGE

18 y

Continued use of furosemide is recommended based on this exam, as is therapy with enalapril (2.5 mg am, 1.25 mg pm) and clopidogrel (18.75 mg SID).

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

WEIGHT

17.48 lb

HOSPITAL NAME

New Bridge VH

REFERRING VET

Dr. Glennon



DATE

5/3/23

PERFORMED BY:

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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.

PATIENT

Perdido Zachary

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)
KeithBlass@gmail.com
631-804-5754

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