


PATIENT

Melvin Macneil

PRESENTING CLINICAL SIGNS

 History: Recheck echo. Current medications: Atenolol 25mg ¼-tab SID.
 -Pertinent previous echo findings (5/2021 MML): Mild LVH, no LAE, mild SAM, trace MR.
 IVSd: 0.65, LVWd: 0.64, LA: 1.1, LVOT: 3.0m/s.

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is mildly hypertrophied. There is a diffusely hyperechoic endocardium consistent with fibrosis and ventricular remodeling. Mild papillary muscle hypertrophy. The right ventricle is subjectively normal in size and morphology. There is no left atrial enlargement present. No right atrial enlargement present. Normal RVOT velocity. Mild systolic anterior motion (SAM) is seen on 2D imaging; however, the LVOT velocity is normal. No mitral regurgitation. No other significant valvular regurgitation is present. There is no pericardial effusion noted. No pleural effusion appreciated. No obvious cardiac tumors.

BREED

DSH

SEX

Male Neutered

AGE

4 years

CARDIAC CHART
WEIGHT

11lbs

INTERPRETED BY

 Maggie Machen Lamy,
 DVM DACVIM
 (Cardiology)

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	5.0	155	0.63	1.2	0.62	55	88
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	1.2	1.3	1.1		1.2	0.9	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.

HOSPITAL NAME

 New Hamburg
 Veterinary Clinic

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Hypertrophic obstructive cardiomyopathy (HOCM) persists with evidence of stability. The LV wall dimensions are unchanged, and the LA remains normal. The previously noted LVOTO is essentially resolved, likely due to Atenolol therapy. No additional issues are identified.

REFERRING VET

Dr. Hausen

Given these findings, continue Atenolol as prescribed. The heart rate is within the target zone and no changes are necessary.

INVOICE

24011

Monitor at home for any respiratory signs or blood clot events (neurologic change, paralysis, etc.). 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 (ketamine, glycopyrrolate, atropine).

DATE

5/4/22



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PLAN

Continue Atenolol as prescribed. Screening blood pressure and T4 are recommended every 6 months.

SPECIES

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Recommend recheck echocardiogram in 6-12 months to assess for progression, sooner if clinical issues arise.

BREED

DSH

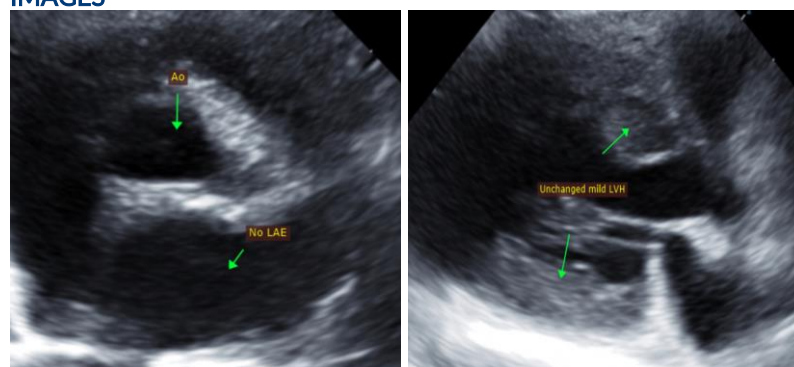
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IMAGES



WEIGHT

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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.

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

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.

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IMAGING PERFORMED BY

Kelly Reschny, RVT

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Veterinary Clinic

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