



**PATIENT**

Schmitty Aria

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

5 years

**WEIGHT**

10lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

Val Shumskaya

**HOSPITAL NAME**

Hillsdale Animal  
Hospital

**REFERRING VET**

Dr. Fischer

**INVOICE**

30685

**DATE**

5/9/23

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. - diagnosed with HCM in 2021.  
-Current medications: Atenolol 6.25mg q24h, Enalapril 2.5mg q24h, Furosemide 12.5mg BID.  
-Abnormal PE/Chem/CBC/UA Results: Glucose 193, wbc 3400, rbc 10.2, HCT 50, platelets 183000(adequate), Neutro 1972 (2500-8500), Lympho 1054 (1200-8000).

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is largely normal with a borderline septal dimension. There is a mildly hyperechoic endocardium consistent with mild fibrosis. The papillary muscles are mildly remodeled. The left atrium is normal in size. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility with no MR. Blood flow through both the LVOT and RVOT is normal in velocity. No TR, AI or PI. No pleural or pericardial effusion seen. No obvious cardiac tumors.

**CARDIAC CHART**

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	LVWd (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	4.5	170	0.57	1.49	0.46	52	86
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	1.4	1.3	1.3		1.1	1.2	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.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Overtly normal cardiac structure and function with no evidence of significant LVH or atrial dilatation. The septum measures borderline with fibrosis of LV wall, which is likely a normal variant. Monitoring for progression to true hypertrophy is advised, particularly if symptoms or PE is suggestive of heart disease in the future (murmur, gallop, etc.). No additional issues are identified, and the LA is normal suggesting low risk for complication.

Given today's findings, there is **no indication for continued cardiac medications**. One exception to this would be if an LVOTO and true LVH were appreciated previously that have resolved on Atenolol. A prior report must be evaluated for comparison. Otherwise, if no LVOTO was appreciated this medication has not been shown to have a significant impact on primary HCM. Additionally, Lasix (high dose) and Enalapril are being administered without explanation. This patient has no risk for CHF, and these can be safely discontinued.

Prognosis is open prior to assessing for progression and obtaining prior historical information.



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No cardiac contraindication for general anesthesia at this time.

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Feline

**PLAN**

No indication for Lasix or Enalapril therapy based upon these findings; however, further historical information may be necessary. Unless a significant LVOTO was documented previously, Atenolol is also unnecessary.

**BREED**

DSH

Baseline BP and T4 every 6 months.

**SEX**

Male Neutered

Recheck echocardiogram in 12 months, sooner should a murmur or gallop develop, or clinical signs of cardiac compromise develop (dyspnea/tachypnea, signs of a blood clot event).

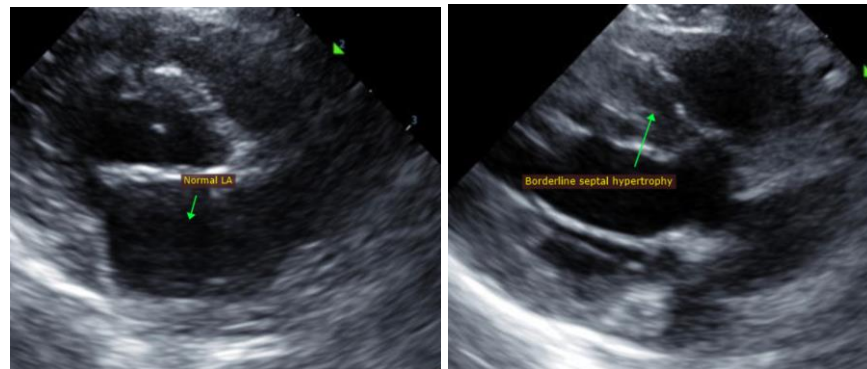
**AGE**

5 years

**IMAGES**

**WEIGHT**

10lbs



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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.

**IMAGING PERFORMED BY**

Val Shumskaya

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.

**HOSPITAL NAME**

Hillsdale Animal  
Hospital

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