



RESENTING CLINICAL SIGNS

History: Hx of hypertension. Gallop sound. Also has a hx of pancreatitis, IBD, and CKD. Currently receiving benazepril 2.5 mg SID, gabapentin, amlodipine 1.875 mg SID, and calcitriol. BNP 92. Sedated for exam with acepromazine and butorphanol.

DATE

6/10/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Dr. Brian Barnes

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve is normal. Left ventricular wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is hyperdynamic. 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 appear are normal. No pericardial effusion or cardiac masses are seen.

ECG during echo: Sinus rhythm

PATIENT

Finnegan Keyworth

IVSd - 5.1 mm
LVPWd - 5.0 mm
LVIDd - 13.8 mm
LVIDs - 5.1 mm
FS - 63%
LVOT - 1.05 m/s
RVOT - 1.05 m/s

SPECIES

Feline

ASSESSMENT/RECOMMENDATIONS

Normal echocardiogram

BREED

DMH

This examination demonstrates no evidence of structural heart disease, nor does it demonstrate any cardiac changes that could occur secondary to systemic hypertension. As such, no reason for Finnegan's gallop sound is appreciated in the image set, and it's likely that the gallop is secondary to his hypertension.

No therapy is recommended based on this exam.

SEX

A recheck echocardiogram is recommended if new physical exam and/or clinical abnormalities suggestive of the presence of cardiac dysfunction develop.

MN

AGE

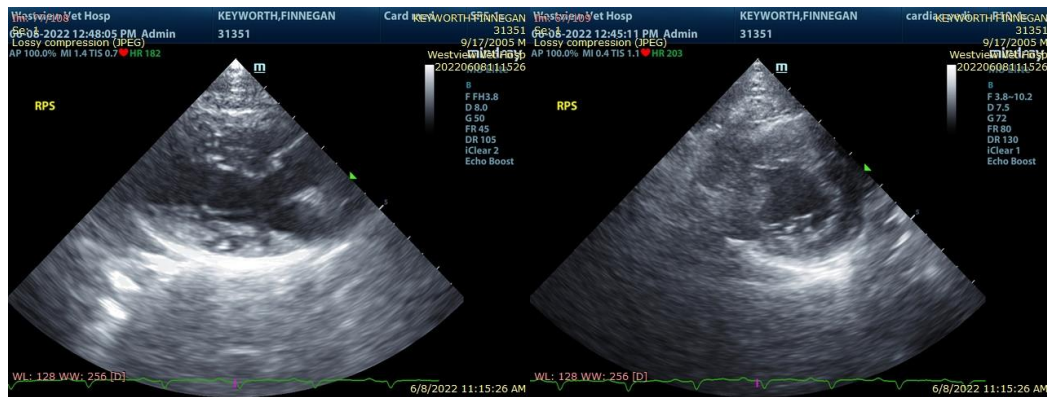
16 y

WEIGHT

9.29 kg

HOSPITAL NAME

Westview VH



REFERRING VET

Dr. Barnes

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.

DATE

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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.

PERFORMED BY:

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