


**PATIENT**

Gino Binham

**SPECIES**

Feline

**BREED**

Maine Coon

**SEX**

Male Neutered

**AGE**

10 years

**WEIGHT**

23.8lbs

**INTERPRETED BY**

 Maggie Machen Lamy,  
 DVM, DACVIM  
 (Cardiology)

**IMAGING PERFORMED BY**

Kevin Kicker, DVM

**HOSPITAL NAME**

Wauwatosa Vet

**REFERRING VET**

Dr. Kicker

**INVOICE**

31639

**DATE**

6/29/23

**PRESENTING CLINICAL SIGNS**

History: Because of breed predisposition owner is requesting full cardiac screening. Occasional cough.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. There is a mildly hyperechoic endocardium consistent with mild fibrosis. The endocardium also appears mildly remodeled. The papillary muscles are normal in size and hyperechoic. 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. No obvious valve regurgitation. Blood flow through both the LVOT and RVOT is normal in velocity. No pleural or pericardial effusion seen. No obvious cardiac tumors. A massive fluid-filled lesion is appreciated cranial to the heart base (3.3cm x 3.0cm) in best viewed cross section. The fluid is hypoechoic in appearance.

**CARDIAC CHART**

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	LWVd (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	10.8	220	0.50	1.4	0.49	58	90
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	1.2	1.1	1.1			0.7	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. The LV wall thickness is normal, and there is no evidence of elevated left atrial pressure or underlying pathology at this time. There is mild remodeling and fibrosis of the left ventricular wall, which is considered likely a normal age-related finding. Given these findings, no medications are indicated.

A large cystic lesion is appreciated cranial to the heart base. This is suspected to be a benign branchial cyst; however, further evaluation is advised. Recommend sampling as the next step, to rule out an abscess and attempt to obtain a definitive diagnosis. A thoracic CT scan may also be warranted pending results. That being said, a majority of lesions with this appearance are benign and can be seen in cats. Repeat 3-view chest films may also be beneficial as the included films do not allow for extensive visualization of the cranial thorax.

Anesthesia is not advised. Once removed there is no cardiac contraindication for general anesthesia.



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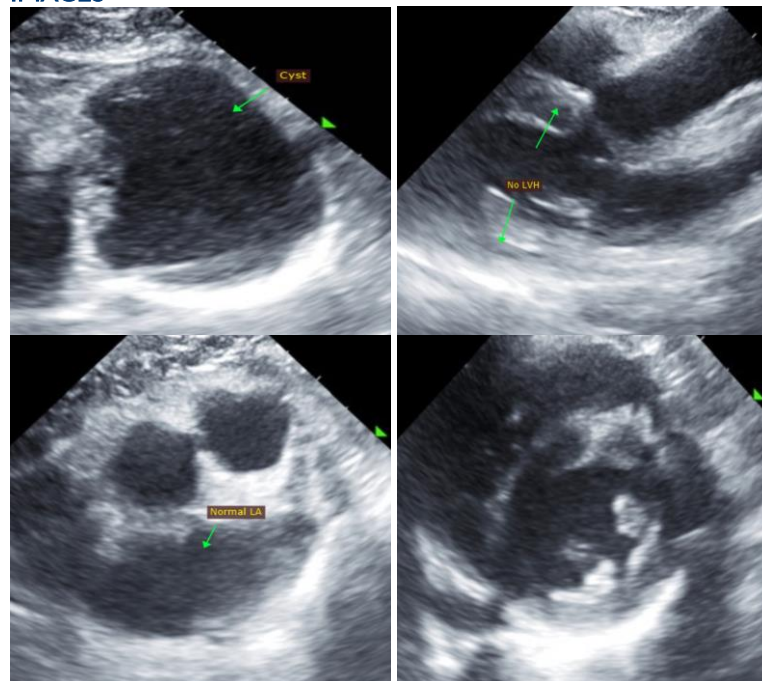
6/29/23

**PLAN**

Highly recommend 3-view CXR with a Radiologist review. Lesion sampling with cytology +/- thoracic CT scan.

Recommend recheck echocardiogram in 1 year, sooner if clinical signs arise.

**IMAGES**



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.

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.

Maggie Machen Lamy, DVM  
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