



DATE PRESENTING CLINICAL SIGNS

7/13/23

History: Grade III/VI sternal murmur. Pre-anesthetic evaluation (dental). ECG WNL.

ECHOCARDIOGRAPHIC FINDINGS

2D and M-mode study.

PERFORMED BY:

Dr. Meredith Swart

Left atrial size is normal. The mitral valve appears normal, though trace mitral regurgitation is present. Left ventricular wall thickness is normal. 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 appear normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No pericardial effusion or cardiac masses are seen.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA/Ao - 1.46
IVSd - 5.0 mm
LVPWd - 5.3 mm
LVIDd - 12.1 mm
LVIDs - 6.3 mm
FS - 47.9%
LVOT - 1.00 m/s
RVOT - 1.20 m/s

PATIENT

Harry Belmonte

ASSESSMENT/RECOMMENDATIONS

SPECIES

Feline

The only potential abnormality seen in this exam is trace regurgitation of blood across Harry's mitral valve, which could potentially be a normal physiologic variant. The hemodynamic effects of the regurgitation are negligible, and Harry's cardiac function appears to be well-compensated.

BREED

DSH

Harry's cardiovascular risk for general anesthesia is low based on this exam, and there are no contraindications to the use of any specific anesthetic agents.

No therapy is recommended based on this exam.

SEX

MN

A recheck echocardiogram is recommended in 12 months, sooner if new clinical signs compatible with cardiac dysfunction develop.

AGE

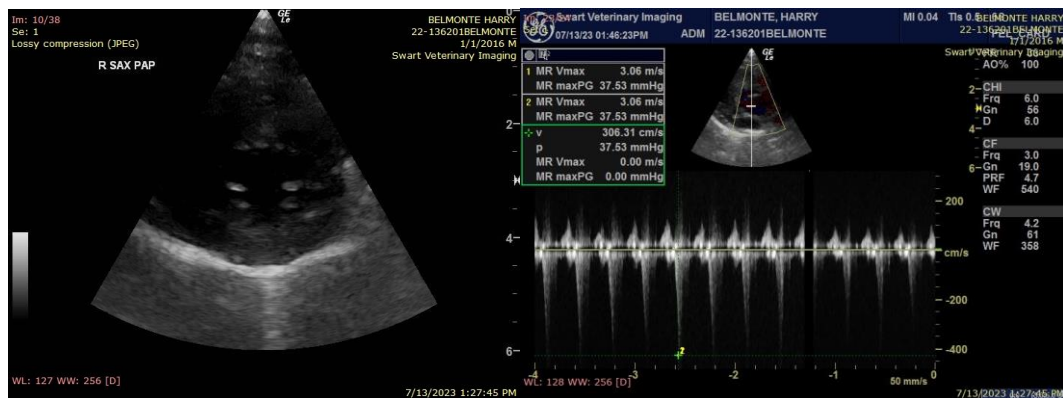
7 y

WEIGHT

6.3 kg

HOSPITAL NAME

Swart Veterinary
Imaging



REFERRING VET

Dr. Swart

The information and recommendations provided are based on the images presented by the



DATE referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

7/13/23 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: Keith Blass, DVM, MS, DACVIM (Cardiology)
Dr. Meredith Swart KeithBlass@gmail.com
631-804-5754

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