



PATIENT

Kakashi Jones

SPECIES

Feline

BREED

Bengal

SEX

Male Neutered

AGE

7.20.08

WEIGHT

5.5lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

HOSPITAL NAME

Banfield Columbia

REFERRING VET

Dr. Hirsch

INVOICE

31880

DATE

7.17.23

PRESENTING CLINICAL SIGNS

History: Weight loss. Grade 2/6 left systolic murmur.
 -Abnormal lab work: Bloodwork 2/23 showed ALT 174 U/L, otherwise unremarkable (thyroid not performed at that time). Bloodwork 5/23 Showed ALT 178 U/L, T4 1.4.
 -Current medications: None.
 -Sedation used: Not required to complete full diagnostic ultrasound.
 -Pertinent previous ultrasound results: No previous.
 -STAT: Not requested
 -Imaging performed by: Stephanie Warga RDCS, RVT.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is mildly remodeled with a focal basilar septal thickening. The free wall and the remainder of the septum measure normal. There is a mildly hyperechoic endocardium. The papillary muscles appear normal. The endocardium also appears 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. Trace tricuspid regurgitation. Normal velocity. Blood flow through both the LVOT and RVOT is normal in velocity. 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	3.5-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	2.5	NM	0.40	1.4	0.38	49	84
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	NM	1.0	1.0	1.4	1.1	NM	

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

Focal septal hypertrophy is present, which may be indicative of early hypertrophic disease or may simply represent a normal variant. A screening BP and T4 are highly recommended as possible contributing issues. Regardless, the LA remains normal which would indicate clinical stability. Serial echocardiography will be necessary to determine progression and clinical significance. Additionally, no definitive cause is identified for the murmur in this study, making it likely benign and secondary to tachycardia/stress. **Premature beats are noted throughout the study and an ECG is strongly recommended.**

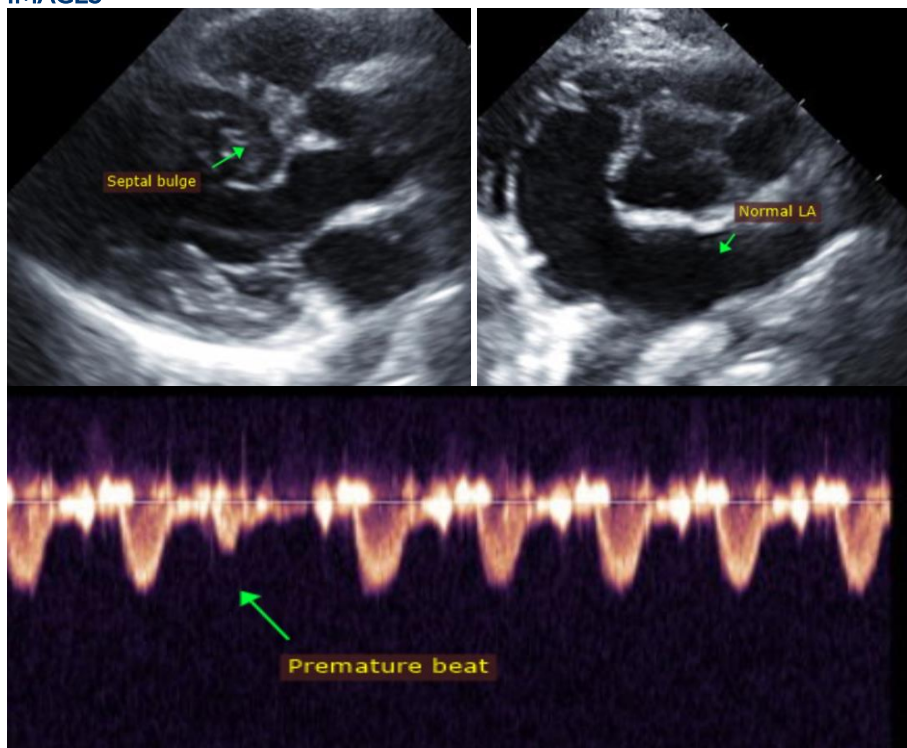
With a normal LA dimension, no medications are indicated.

Pending further ECG evaluation, anesthetic risk is mild; however, any cat is at risk for iatrogenic IV fluid overload should they be needed in the future and monitoring is advised.

Monitor for any development of clinical signs, including labored breathing or signs of a blood clot (paralysis, neurologic change).

A recheck echocardiogram is recommended in 6-12 months to screen for any evidence of progression.

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.

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