



PATIENT

Magic Tyler

SPECIES

Feline

BREED

Maine Coon Mix

SEX

Male Neutered

AGE

18 years

WEIGHT

12lbs

INTERPRETED BY

Maggie Machen
 Lamy, DVM, DACVIM
 (Cardiology)

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Hello Vet for Pets
 LLC

REFERRING VET

Dr. Kastella

INVOICE

32023

DATE

7/31/23

PRESENTING CLINICAL SIGNS

History: Progressive grade 3/6 heart murmur. A week ago, wasn't moving much and having trouble walking - back legs would slide out from under him. Hips were "weak".
 -Current medications Cosaquin, fish oil, Buprenorphine.

-Abnormal PE/Chem/CBC/UA Results: Neutrophils 10275 (1900-9500) CHEM Abnormal Findings. Chl 111 (113-124), ALT 18 (26-143) TT4 = 1.8 (0.7-3.6) UA Abnormal Findings. USG 1.055, pH 6.5, 2+ protein, rare WBCs, rare RBCs UPC = 0.3 (0-0.2) - borderline proteinuria. ProBNP: 222.

ELECTROCARDIOGRAPHIC FINDINGS *Note: Single lead ECGs are evaluated as a rhythm strip. Morphology/MEA cannot be definitively commented on.

A single lead ECG is available; 50mm/s, 20mm/mV. The average heart rate is 200bpm with a largely regular rhythm. The rhythm is sinus in origin, with a p for every QRS complex and vice versa. The P morphology is positive. The QRS is inverted. No ectopic beats, pauses or dysrhythmias observed.

ECG diagnosis: Normal sinus tachycardia.

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. Mild TR. normal velocity. Trace MR. Blood flow through both the LVOT and RVOT is normal in velocity. Mild to moderate aortic insufficiency. No pleural or pericardial effusion seen. No obvious cardiac tumors.

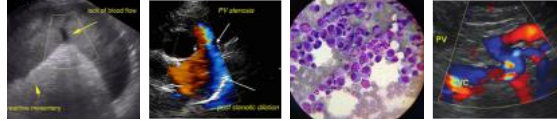
CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) (Moise, Pipers)	LVIDd (cm) (Moise, Pipers)	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	5.4	200	0.64	1.58	0.53	70	97
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	1.5	1.3	1.4		1.2	1.0	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

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



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significance. Additionally, no definitive cause is identified for the murmur in this study, making it likely benign and secondary to tachycardia/stress. A significant aortic insufficiency is noted, and a **baseline BP is strongly recommended**. The ECG is unremarkable with a normal sinus tachycardia.

SPECIES

Feline

Given these findings, no medications are indicated. No cardiac contribution to the recent clinical issues is suspected and other possibilities should be considered.

BREED

Maine Coon Mix

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.

SEX

Male Neutered

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

AGE

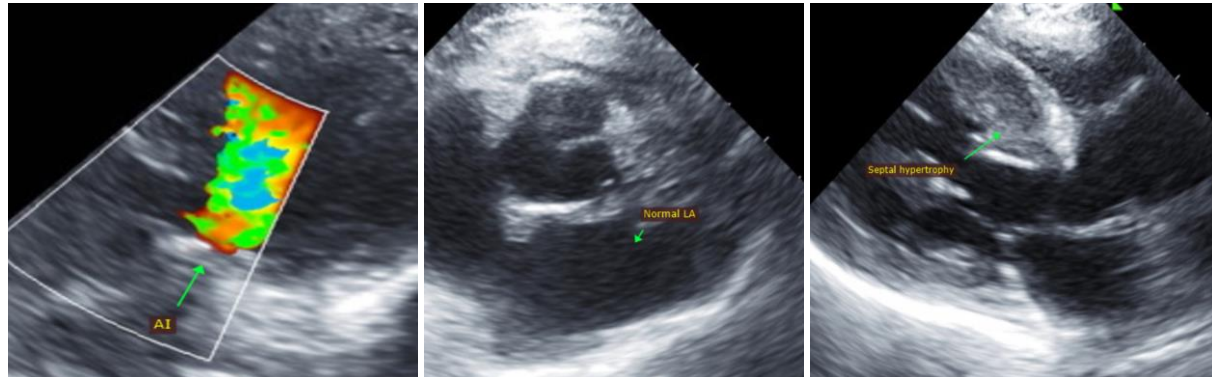
18 years

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

WEIGHT

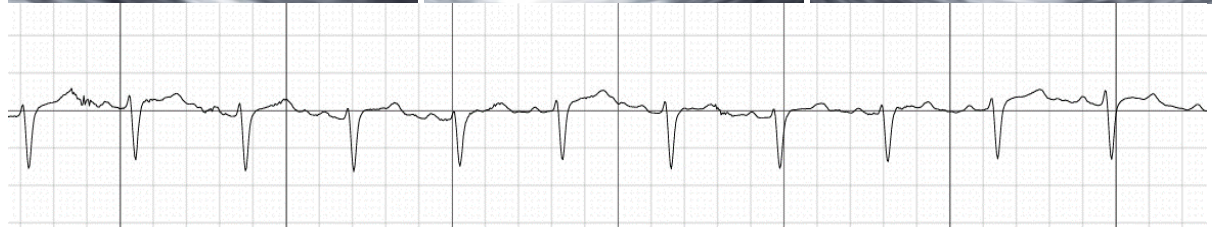
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IMAGES



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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.

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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.

DATE

7/31/23

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