
DATE PRESENTING CLINICAL SIGNS

7/7/23 History: Subtle thyroid slip and slight inspiratory distress noted on 5/12/23. BUN 53, Cr 3.0, SDMA 15 on 5/15/23. BNP 1500.

ECHOCARDIOGRAPHIC FINDINGS

PERFORMED BY: 2D, M-mode, and Doppler study.

Sara Hansen

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

There is mild to moderate left atrial dilation. The mitral valve appears normal, though mild 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 are normal. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. Trivial pericardial effusion is present. No cardiac masses are seen.

PATIENT LA/Ao - 1.86

Livfree Birch IVSd - 4.9 mm
LVPWd - 4.6 mm
LVIDd - 15.4 mm
LVIDs - 7.7 mm
FS - 50%

SPECIES LVOT - 1.03 m/s
RVOT - 0.90 m/s

Feline

ASSESSMENT/RECOMMENDATIONS

BREED

Siberian

SEX

FS

AGE

16 y

WEIGHT

10.69 lb

HOSPITAL NAME

Balanced Veterinary
Care

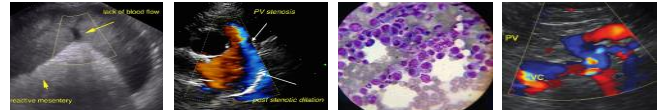
REFERRING VET

Dr. Wright

This examination demonstrates mild to moderate dilation of Livfree's left atrium, with differentials for this finding including a restrictive cardiomyopathy (RCM), an atrial myopathy, and cardiac thyrotoxicosis. Given the presence of mild to moderate left atrial dilation, I am concerned that Livfree's respiratory clinical signs are due to the development of congestive heart failure (CHF), though thoracic radiographs are recommended for further evaluation. In addition to CHF, Livfree is at risk for thromboembolic disease and arrhythmia formation, therefore, careful monitoring for these is recommended.

If CHF is confirmed or highly suspected (if radiographs are not taken), Livfree will need to receive diuretic therapy despite her already being azotemic. I recommend using the lowest effective dose of furosemide, for example starting at 5 mg BID, and adjusting the dose as needed based on clinical response and degree of azotemia present. I also recommend starting Livfree on clopidogrel (18.75 mg SID).

Thoracic radiographs and a renal/electrolyte profile are recommended in 1 week. A recheck echocardiogram is recommended in 6 months.



DATE

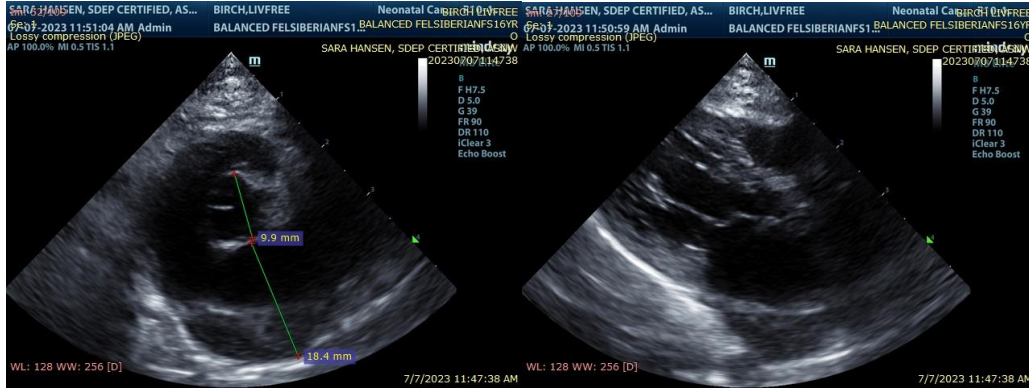
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PATIENT

Livfree Birch

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. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

SPECIES

Feline

Keith Blass, DVM, MS, DACVIM (Cardiology)
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631-804-5754

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Siberian

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