

IMAGING PERFORMED BY

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Clinical Sonography & Telecytology

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PATIENT

Madison Gasior

SPECIES

Feline

BREED

DSH

SEX

Female Spayed

AGE

8.12.13

WEIGHT

12.2lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

HOSPITAL NAME

Banfield Timonium

REFERRING VET

Dr. Kameka

INVOICE

25232

DATE

7.8.22

PRESENTING CLINICAL SIGNS

History: Recheck echo. Grade 3/6 parasternal systolic heart murmur.

-Pertinent abnormal PE/Chem/CBC/UA Results: Routine CBC/Chem unremarkable.

-Current medications: None.

-Sedation used: Not required to complete full diagnostic ultrasound. Recc- Gabapentin for future scans.

-Pertinent previous ultrasound results (10/2019 MML): LV fibrosis with false tendons, no LVH or LAE.

-STAT: Not requested

-Imaging performed by: Stephanie Pearce RDCS, RVT.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is irregular; however, no significant hypertrophy is identified. There are regions of apical thinning that are unchanged. Fibrosis/false tendons persist. Remodeled papillary muscles. The left atrium is normal in dimension. No MR. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility. Blood flow through both the RVOT and LVOT are normal in velocity. No PI or AI. No effusions or obvious cardiac tumors identified.

CARDIAC CHART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LVWd (cm) <small>(Moise, Pipers)</small>	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	3.5-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	5.52	NM	0.49	1.57	0.48	59	90
FELINE CARDIAC PARAMETERS	LA/AO <small>(Boon)</small>	LA/AO HEART BASE (Swe) <small>(Abbott)</small>	LA 2D short axis Base view (cm) <small>(Abbott)</small>	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	1.3	1.3	1.0	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

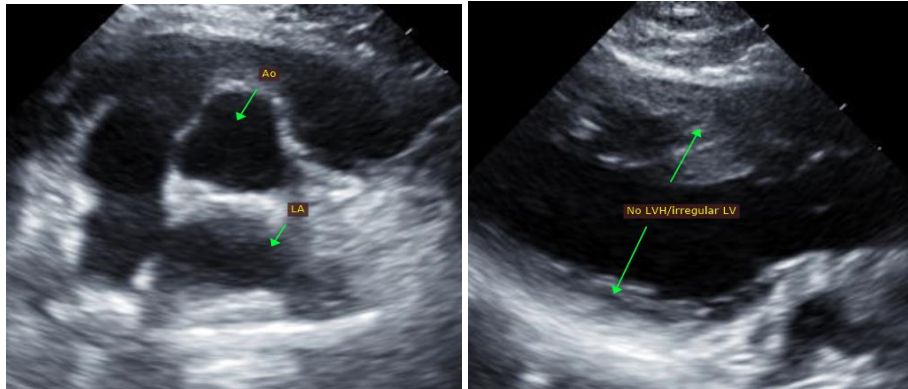
Unchanged cardiac structural and function. The LV remains irregular; however, no obvious progression is seen. The LA is normal, and no additional issues are identified.

Anesthetic risk remains mild at this time, however judicious IV fluid rates are advised to avoid fluid overload. Additionally, drugs that stimulate heart rate should be avoided unless clinically necessary (glycopyrrolate, atropine).

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

No cardiac medications are clearly indicated. A recheck echocardiogram is recommended annually to screen for progressive changes the pre-existing murmur may mask.

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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