

**PATIENT**

Rory Rose King

**SPECIES**

Feline

**BREED**

Domestic Short Hair

**SEX**

Female Spayed

**AGE**

2010

**WEIGHT**

7lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**HOSPITAL NAME**

Perry Hall Animal  
Hospital

**REFERRING VET**

Dr. Hatzigiannakis

**INVOICE**

20490

**DATE**

8/11/21

**PRESENTING CLINICAL SIGNS**

History: Recheck echo. Acute on chronic renal failure, persistent heart murmur.

-Pertinent abnormal PE/Chem/CBC/UA Results: Marked elevation of SDMA, BUN, CREAT, PHOS, and hypokalemia.

-Current medications: Started on 8/9/10: Unasyn 22mg/kg bid, Cerenia 1mg/kg SID, Protonix 1mg/kg SID, Buprenorphine 0.01mg/kg BID, Entyce 2mg/kg SID, LRS with KCL supplementation.

-Sedation used: Not needed.

-Pertinent previous ultrasound results: (4/2/20 MML): Borderline LVH, mild LVOTO: 2.2m/s. IVS: 0.5, LVPWd: 0.56, LA: 1.2.

-STAT: Not requested/declined.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is borderline normal in dimension with regions of irregularity. There is a diffusely hyperechoic/irregular endocardium consistent with fibrosis and remodeling. Papillary muscles appear remodeled. The left atrium is normal in size. The right atrium is normal in size. The right ventricle appears normal. No TR. The mitral valve is normal in structure and mobility. Blood flow through the RVOT is normal in velocity. Blood flow through the LVOT is mildly elevated depending on heart rate with a dynamic profile; up to 3.0m/s. There is eccentric mitral regurgitation. There is no pleural or pericardial effusion seen. There are 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	3.2	200	0.53	1.3	0.57	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	1.3	1.2		3.2	1.4	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**

Largely unchanged structural disease. The LV wall thickness is borderline without significant progression. The LVOTO is similar to the prior study with secondary MR. Finally, and most importantly, the LA remains normal despite fluid therapy, indicating tolerance thus far. No additional issues are identified.

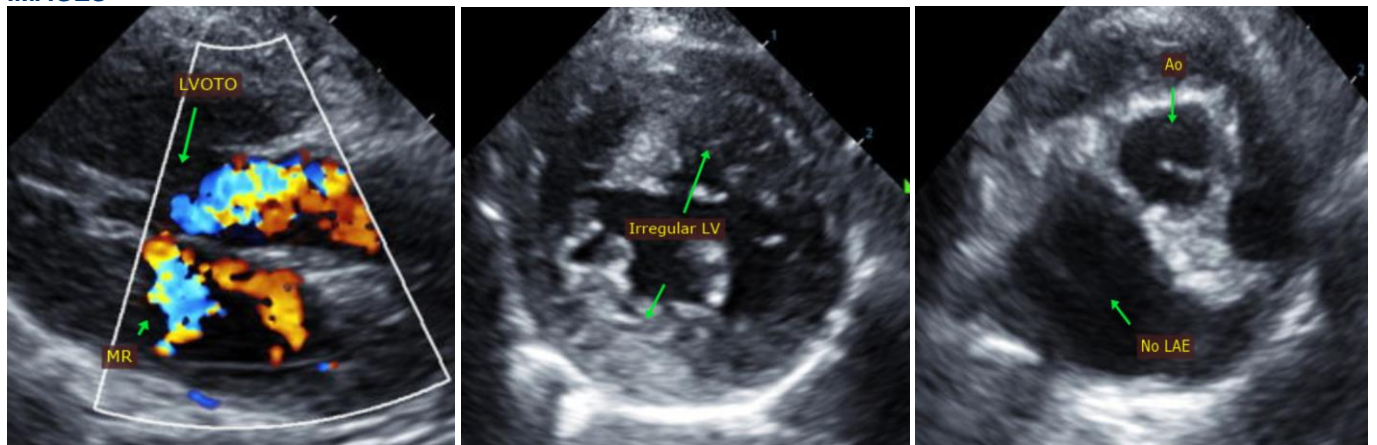
Given these findings, no medications remain indicated. This patient will certainly be at risk for fluid overload even with cautiously good news so far, and close monitoring of breathing rates is advised while being administered.

Monitor for any clinical signs associated with progression, including increased RR/RE, syncope or signs of a blood clot (paralysis, neurologic change, etc.).

Anesthetic risk is currently low. Avoid heart rate stimulating drugs (atropine, glycopyrrolate) unless clinically necessary. Avoid vasodilators such as acepromazine as this can worsen obstruction. Judicious IV fluid rates are recommended to avoid fluid overload in this patient with diastolic dysfunction.

A recheck echocardiogram is recommended in 6-12 months to assess for progression, sooner if any clinical signs arise.

## **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.

**Maggie Machen Lamy, DVM  
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)**