**PATIENT**

Poe Aviles

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

1 year

WEIGHT

12.1lbs

INTERPRETED BYMaggie Machen
Lamy, DVM, DACVIM
(Cardiology)**HOSPITAL NAME**

Everhart WellPet

REFERRING VET

Dr. Key

INVOICE

50557

DATE

8/16/21

PRESENTING CLINICAL SIGNS

History: Pet adopted from BARCS In January of 2021. Baltimore Animal Rescue and Care Shelter had diagnosed Grade 2-3/6 heart murmur and had an echo done. Echo showed tricuspid regurgitation. BARCS recommended recheck echo. On 8/10/21, PE showed continued grade 2-3/6 heart murmur -Sedation used: Not needed.

-Pertinent previous ultrasound results: No previous IntraPet scans. Scan done at BARCS.
-STAT: Not requested

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. There is a mildly hyperechoic endocardium. Minimal remodeling. The papillary muscles are normal. The left atrium is normal in size. The right atrium is normal in size. Suspect intermittent mid-LV obstruction. The right ventricle appears normal. The mitral valve is normal in structure and mobility. No MR. The tricuspid valve appears normal in structure and mobility. No TR. Blood flow through both the LVOT and RVOT are normal in velocity. No effusions. No obvious cardiac tumors.

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	5.5	200	0.47	1.2	0.49	46	81
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	1.1		1.36	0.7	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

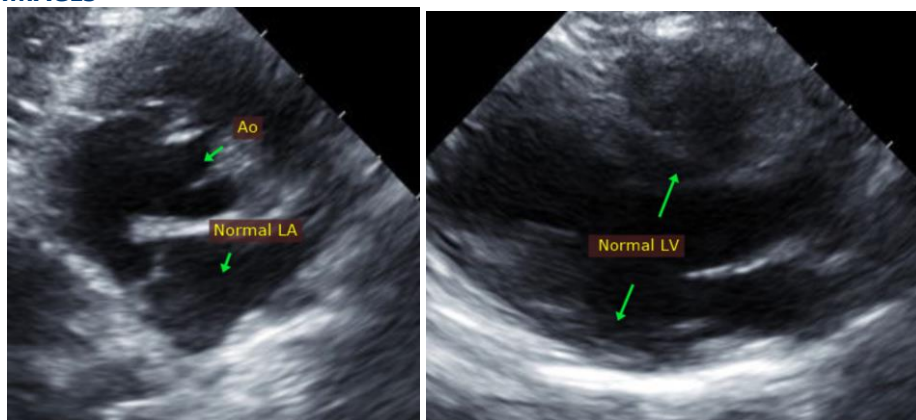
Overtly normal cardiac structure and function. No significant valve leaks are noted, and flow through the great vessels is normal in velocity. No definitive cause is identified for the murmur in this study, making it likely physiologic in origin (i.e., secondary to tachycardia, volume changes, etc.). An intermittent mid-LV obstruction is suspected which is benign. No TR is appreciated as was noted on prior exams. Given these findings and a normal LA dimension, no medications are indicated.

No cardiac contraindication for general anesthesia. Should fluid or steroid therapy be indicated in the future, any cat should be monitored for intolerance (changes in RR/RE).

Monitor at home for signs of cardiac compromise, including respiratory changes and/or signs of a blood clot event (paralysis, neurologic changes).

Recommend recheck echocardiogram in 1 year to assess for any progressive issues or development of disease 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.

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