



PATIENT

Ideal Tsuverkalov

SPECIES

Feline

BREED

Scottish Fold

SEX

Male Neutered

AGE

6 months

WEIGHT

6.5lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Jessica Miller, RDMS

PRESENTING CLINICAL SIGNS

History: Cardiomegaly on x-rays. History of lymphoma in patients' family. Coughing.

-Current medications: Clavamox drops- 0.6mls BID

-Abnormal PE/Chem/CBC/UA Results: ALT 289, Neut 2050, eosin 1230.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is normal in dimension. There is a diffusely hyperechoic endocardium consistent with mild fibrosis. The papillary muscles are normal in size and hyperechoic. The endocardium appears normal. 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 with trivial MR. Normal flow through both the RVOT and LVOT. Trace AI. No obvious TR or PI. No pleural or pericardial effusion seen. 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 | 0.35-0.55 | <2 (mean 1.5) | 3.5-0.55 | 35-67 | 80-100 |
| PATIENT | 2.9 | 188 | 0.37 | 1.2 | 0.42 | 52 | 86 |
| 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 <small>(m/s)</small> | RVOT VEL <small>(m/s)</small> | E max <small>(m/s)</small> |
| NORMAL | <1.5 | <1.3 | <1.2 | | <1.6 | <1.3 | <0.9 |
| PATIENT | 1.3 | 1.1 | 0.94 | | 1.0 | 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

Overtly normal cardiac structure and function. The LV wall thickness is normal and there is no evidence of elevated left atrial pressure. Trace AI is noted, which is hemodynamically insignificant at this time. No obvious congenital issues are documented.

These findings would suggest the radiographic appearance is a normal variant. These films should be used as a baseline for future comparison. Additionally, no cardiac cause for a cough is seen here.

Given these findings, no medications are indicated. It is important to note that phenotypic HCM can develop at any phase of life in cats (particularly in this predisposed breed), and often does not accompany a heart murmur or PE abnormalities. Periodic screening is ideally recommended in all cats.

No cardiac contraindication for general anesthesia at this time.

DATE

8/23/23

HOSPITAL NAME

Animal General on Hudson

REFERRING VET

Dr. Dima

INVOICE

32515



PATIENT

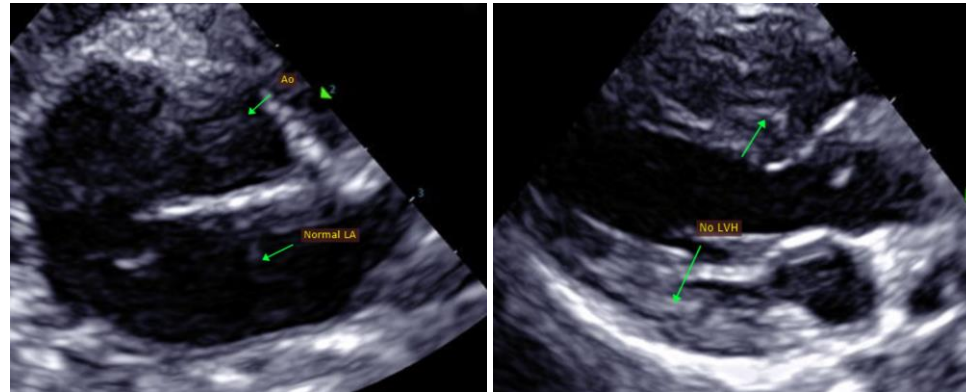
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Recommend recheck echocardiogram in 1 year to screen for any progressive changes.

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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.

WEIGHT

6.5lbs

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.

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

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