


**PATIENT**

Stewie Anson

**PRESENTING CLINICAL SIGNS**

History: History of triaditis. Grade 2/6 heart murmur. BP: 125mmHg. Assess prior to steroid use.

**SPECIES**

Feline

-Current medications: Ursodiol 62.5mg SID, Solensia every 30 days, Metronidazole 25mg SID, Cerenia 4mg q 24 hours, Mirtazapine q 24-48 PRN.

-Abnormal PE/Chem/CBC/UA Results: Moderate increase ALP, ALT, AST, Mild increase T. Bili, mild increase fPL, T4 WNL, Urine SG - less than 1.035.

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

16 years

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is remodeled with a borderline focal septal thickening. The remainder of the LV wall is normal. There is a diffusely hyperechoic endocardium consistent with fibrosis. The papillary muscles are mildly hypertrophied and hyperechoic. The endocardium also appears remodeled. 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. No MR or TR is visualized. Blood flow through the LVOT and RVOT are normal in velocity. No pleural or pericardial effusion seen. No obvious cardiac tumors.

**CARDIAC CHART**
**WEIGHT**

13lbs

**INTERPRETED BY**

 Maggie Machen Lamy,  
 DVM DACVIM  
 (Cardiology)

**IMAGING PERFORMED BY**

Crystal Hill, RVT

**HOSPITAL NAME**

 The Cat Clinic  
 Hamilton

**REFERRING VET**

Dr. Hall

**INVOICE**

32519

**DATE**

8/23/23

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	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	5.9	180	0.56	1.4	0.46	51	85
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	1.4	1.3	1.3		0.7	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**

Borderline focal LV hypertrophy is present in addition to LV remodeling, which may be indicative of early hypertrophic disease or may simply represent a normal variant. In this normotensive euthyroid cat, possible contributing issues have been ruled out. Regardless, the LA is normal which would indicate clinical stability. Serial echocardiography will be necessary to determine progression and clinical significance. Additionally, no definitive cause is identified for the murmur in this study, making it likely benign and secondary to tachycardia/stress.

With a normal LA dimension, no medications are indicated.



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Anesthetic risk is mild, however any cat with this degree of fibrosis and diastolic dysfunction will be at risk for iatrogenic IV fluid overload should they be needed in the future.

**SPECIES**

Feline

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

**BREED**

DSH

A recheck echocardiogram is recommended in 6-12 months to screen for any evidence of progression.

**IMAGES**

**SEX**

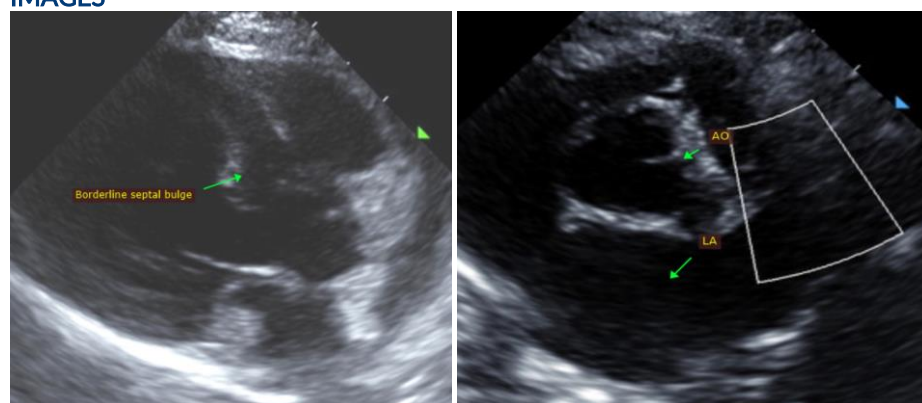
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DVM DACVIM  
(Cardiology)

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.

**IMAGING PERFORMED BY**

Crystal Hill, RVT

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)  
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