


PRESENTING CLINICAL SIGNS

History: Abnormal SNAP BNP test. Poor appetite for one month. Several episodes of tachypnea at home. PE – pale mucus membranes. PCV 28% on 7/13 and 30% on 8/4.

DATE

8/8/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Jenna Walsh, CVT

There is mild to moderate left atrial dilation. The mitral valve appears normal, though trace mitral regurgitation is present. Left ventricular wall thickness is normal. The left ventricular diastolic dimension is normal. Left ventricular systolic function is severely depressed. The aorta and aortic valve are normal. There is mild to moderate right atrial dilation. Right ventricular dimensions are normal. The tricuspid valve appears normal, though mild tricuspid regurgitation is present. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

LA/Ao – 1.84
IVSd – 4.6 mm
LVPWd – 4.0 mm
LVIDd – 17.1 mm
LVIDs – 14.7 mm
FS – 14%
RA – 16.7 mm
LVOT – 0.60 m/s
RVOT – 0.60 m/s
TR – 1.10 m/s

PATIENT

Nelly Elias

SPECIES

Feline

ELECTROCARDIOGRAPHIC FINDINGS

A single lead ECG is submitted for review.

BREED

HR: 260 bpm

DSH

Rhythm: Atrial fibrillation

The underlying rhythm is rapid and irregular. There are no discernible P waves, consistent with atrial fibrillation. All complex amplitudes and intervals are within normal limits. No ventricular ectopy is seen.

SEX

FS

ASSESSMENT/RECOMMENDATIONS
AGE

8 y

Nelly's echocardiogram demonstrates severe depression of her left ventricular systolic function, with differentials for this finding including dilated cardiomyopathy (DCM), taurine-deficiency cardiomyopathy, and myocarditis. Secondary to her myocardial dysfunction, Nelly has mild to moderate dilation of both her left atrium and left ventricle, and her ECG shows that Nelly has developed atrial fibrillation. Given these findings, it's likely that Nelly's episodes of tachypnea, and possibly her poor appetite, are cardiogenic in origin. Nelly is also at risk for the development of dyspnea, abdominal distension, collapse, and limb paresis/paralysis, therefore, careful monitoring for these signs is recommended.

WEIGHT

6.62 lb

HOSPITAL NAME

Q Street AH

A whole blood taurine level is recommended, and taurine supplementation (250 mg BID) should be given if a deficiency is documented.

Recommended therapy based on Nelly's echocardiogram includes furosemide (3.125 mg BID), enalapril (1.25 mg BID), pimobendan (1.25 mg am, 0.625 mg pm), and clopidogrel (18.75 mg SID), while recommended therapy for her atrial fibrillation is diltiazem (7.5 mg BID-TID).

REFERRING VET

Dr. Cone



A recheck physical exam, renal profile, and ECG are recommended in 2 weeks. A recheck echocardiogram is recommended in 6 months.

DATE

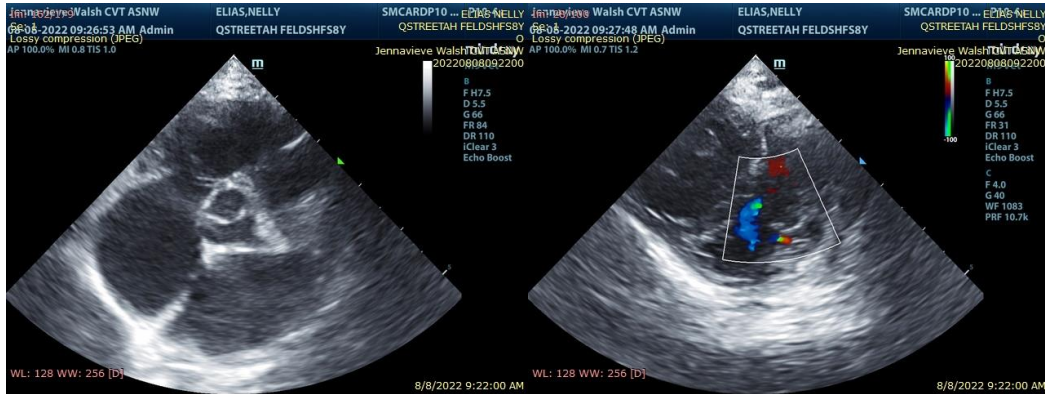
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PATIENT

Nelly Elias

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.

SPECIES

Feline

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Keith Blass, DVM, MS, DACVIM (Cardiology)
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631-804-5754

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Dr. Cone