
PATIENT

Roman BHS

PRESENTING CLINICAL SIGNS

History: Recheck echo. Grade 2-3/6 Systolic Murmur.
 -Current medications: Atenolol 25mg ¼ tab PO SID.
 -Pertinent previous echo findings (4/2021 MML): Mild to moderate LVH, no LAE, mild SAM.
 IVSd: 0.73, LVWd: 0.70.

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular wall is mildly hypertrophied. There is a diffusely hyperechoic endocardium consistent with fibrosis and ventricular remodeling. Mild papillary muscle remodeling. The right ventricle is subjectively normal in size and morphology. There is no left atrial enlargement present. No right atrial enlargement present. Normal RVOT velocity. No obvious systolic anterior motion (SAM) is seen on 2D, color flow or Spectral doppler imaging with a normal LVOT velocity. No obvious mitral regurgitation. No other significant valvular regurgitation is present. There is no pericardial effusion noted. No pleural effusion appreciated. No obvious cardiac tumors.

BREED

DSH

SEX

Male Neutered

AGE

5 years

CARDIAC CHART
WEIGHT

16.5lbs

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	7.5	164	0.65	1.5	0.65	56	89
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	1.5	1.3	1.3		0.85	0.96	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.

INTERPRETED BY

 Maggie Machen Lamy,
 DVM DACVIM
 (Cardiology)

IMAGING PERFORMED BY

Kelly Reschny, RVT

HOSPITAL NAME

 Burlington Humane
 Society

REFERRING VET

Dr. Wallace

INVOICE

21062

DATE

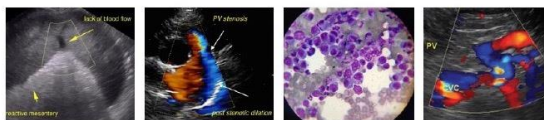
9/16/21

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOCM persists with evidence of mild improvement. The previous LVOT obstruction is resolved on Atenolol and there is a mild improvement in LV hypertrophy. The LA remains normal indicating the risk at this time is low. No additional issues are identified.

No additional medications are indicated, continue Atenolol going forward. Prognosis is guarded long-term; however, any improvement is a good sign.

Monitor at home for any respiratory signs or blood clot events (neurologic change, paralysis, etc.). Anesthetic risk is considered mild, however judicious IV fluid rates are advised to avoid fluid overload. Additionally, drugs that stimulate heart rate should be avoided unless clinically necessary (ketamine, glycopyrrolate, atropine).



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PLAN

Continue Atenolol as prescribed.

SPECIES

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Recommend recheck echocardiogram in 6-12 months to assess for progression, sooner if clinical issues arise.

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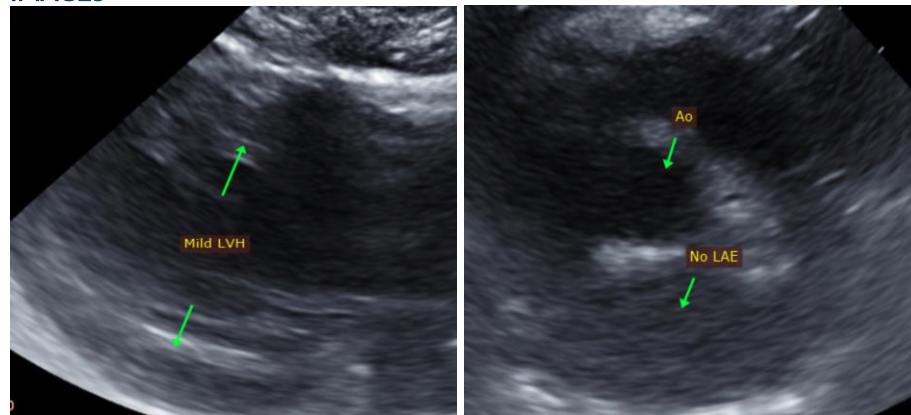
IMAGES

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AGE

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WEIGHT

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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.

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

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.

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