
PRESENTING CLINICAL SIGNS

History: New murmur and gallop sound. Asymptomatic.

DATE

9/2/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Jenna Walsh, CVT

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

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

LA/Ao – 1.89
 IVSd – 5.3 mm
 LVPWd – 5.3 mm
 LVIDd – 19.8 mm
 LVIDs – 11.3 mm
 FS – 42.9%
 RA – 11.1 mm
 LVOT – 1.39 m/s
 RVOT – 0.97 m/s

PATIENT

Willy Gillespie

SPECIES

Feline

ELECTROCARDIOGRAPHIC FINDINGS

A single lead ECG is submitted for review.

BREED

HR: 200 bpm
 Rhythm: Sinus

DSH

Normal sinus rhythm is present throughout this recording. All complex amplitudes and intervals are within normal limits. No premature beats or conduction blocks are seen.

SEX
RADIOGRAPHIC FINDINGS
MN

Orthogonal thoracic radiographs are submitted for review.

AGE

There is mild generalized enlargement of the cardiac silhouette. The pulmonary vessels are within normal limits. The pulmonary parenchyma and pleural space are within normal limits. The trachea is normal. The remainder of the thorax is unremarkable.

8 y
ASSESSMENT/RECOMMENDATIONS
WEIGHT

13 lb

Willy's echocardiogram demonstrates mild to moderate dilation of his left atrium and mild dilation of his left ventricle, with differentials for these findings including a restrictive cardiomyopathy (RCM), cardiac thyrotoxicosis, or a combination of the two. Given the presence of mild to moderate left atrial dilation, Willy is at risk for the development of left-sided congestive heart failure (CHF), cardiac thrombus formation with secondary thromboembolic disease, and arrhythmia formation, therefore, careful monitoring for the development of clinical signs associated with these is recommended.

HOSPITAL NAME

Bandon VC

Willy's ECG and thoracic radiographs are unremarkable, save for the presence of mild cardiomegaly in his radiographs.

REFERRING VET

Dr. Hewitt



A T4 level is recommended.

DATE Recommended therapy based on this exam includes enalapril (2.5 mg BID) and clopidogrel (18.75 mg SID).

9/2/22

A renal/electrolyte profile is recommended in 1-2 weeks. A recheck echocardiogram is recommended in 6 months. Repeat radiographs are recommended if Willy experiences difficulty breathing.

PERFORMED BY:

Jenna Walsh, CVT

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

PATIENT

Willy Gillespie

SPECIES

Feline

BREED

DSH Keith Blass, DVM, MS, DACVIM (Cardiology)
KeithBlass@gmail.com
631-804-5754

SEX

MN

AGE

8 y

WEIGHT

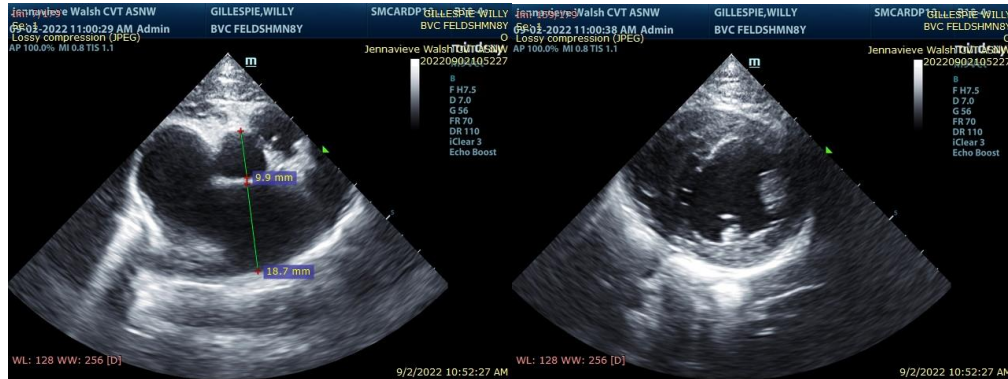
13 lb

HOSPITAL NAME

Bandon VC

REFERRING VET

Dr. Hewitt



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