



PRESENTING CLINICAL SIGNS

History: Arrhythmia. Recent echocardiogram showed segmental LV hypertrophy and mild valvular regurgitation. No current therapy.

DATE

9/23/22

ELECTROCARDIOGRAPHIC FINDINGS

A six lead ECG is submitted for review.

PERFORMED BY:

HR: 200 bpm
Rhythm: Sinus with APCs and VPCs

IDEXX

INTERPRETED BY

The underlying rhythm is sinus in origin. The MEA is normal. All sinus complex amplitudes and intervals are within normal limits. There are occasional single APCs and rare monomorphic left-sided VPCs. No conduction blocks are seen.

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

ASSESSMENT/RECOMMENDATIONS

PATIENT

Wobble's ECG demonstrates the presence of occasional APCs and rare VPCs, which could potentially be secondary to his segmental LV hypertrophy, though a non-cardiac cause, such as hyperthyroidism cannot be ruled out. Mild arrhythmias, such as the one seen in Wobble's ECG, are typically well-tolerated in cats, though careful monitoring for progression is recommended, as more advanced arrhythmias can result in clinical signs, such as exercise intolerance and syncope, as well as sudden death.

Wobble Chovan

SPECIES

A T4 level is recommended if not recently performed.

Feline

No therapy is recommended for Wobble's premature beats at this time.

BREED

A recheck ECG is recommended in 3 months, sooner if new clinical signs compatible with an arrhythmia develop.

Maine Coon Mix

SEX

MN

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.

AGE

15 y

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.

WEIGHT

Keith Blass, DVM, MS, DACVIM (Cardiology)

10.3 lb

KeithBlass@gmail.com
631-804-5754

HOSPITAL NAME

Franklin Lakes AH

REFERRING VET

Dr. Hudson



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