



## PATIENT

Nyx Phillips

## SPECIES

Feline

## BREED

DMH

## SEX

Spayed Female

## AGE

8 Years

## WEIGHT

9.7 pounds

## INTERPRETED BY

Camden Rouben,  
DVM, DACVIM  
(Cardiology)

## IMAGING PERFORMED BY

Cole England DVM

## HOSPITAL NAME

Blue Cross Animal  
Clinic

## REFERRING VET

Dr. Karah Markins

## INVOICE

12149

## DATE

11/07/25

## PRESENTING CLINICAL SIGNS

Asymptomatic with history of murmur; In need of dental care and wanted pre-anesthetic screen.

Abnormal PE/Chem/CBC/UA Results: Grade 3 murmur (no indication of location), pro-BNP SNAP abnormal; No current bloodwork (pending)

## ULTRASONOGRAPHIC EXAMINATION OF THE HEART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
PATIENT	4.4	NM	5.2 mm	--	6.1 mm	--	--
FELINE CARDIAC PARAMETERS	LA/AO (M-mode)	LA/AO HEART BASE (Sisson)	LAD LA MAX 4 Chamber	LVOT VEL. (m/s)	RVOT VEL. (m/s)	IVRT (m/)	
NORMAL PARAMETER	<1.5	1.6	0.7-1.7	<1.6	<1.3	40-60	
PATIENT	1.0	0.95	--	--	0.97	NM	
Adapted from June Boon, Veterinary Echocardiography, 1998 Sisson D et al. JVIM 1991; 5: 232, Jacobs et al. Am J Vet Res 1985; 46:1705							

MR: 4.2 m/s

## Cardiac Presentation

The left atrial size is normal. The mitral valve leaflets are normal. There is trace mitral regurgitation. There is suspected mild thickening of the free wall of the left ventricle. The right atrium is normal. The tricuspid valve is normal without evidence of tricuspid regurgitation. The right ventricle appears to have preserved systolic function. The aortic and pulmonic valves are subjectively normal without evidence of insufficiency. There is no evidence of pleural effusion, pericardial effusion or intracardiac masses.

## ULTRASONOGRAPHIC FINDINGS

- Based off the images provided, this patient does have very mild to equivocal thickening of the left ventricular free wall.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This patient should be ruled out hypertrophic cardiomyopathy stage B1 or hypertrophic cardiomyopathy phenotype. If not already performed, this patient should have a blood pressure assessment and a thyroid assessed. A full CBC and chemistry should be performed as well to rule out kidney disease.

No cardiac medications are indicated at this time as this patient is at low risk for complications



**PATIENT**

Nyx Phillips

associated with HCM. Since this can be a progressive condition, serial monitoring is recommended, and it is recommended to recheck an echocardiogram in 6 months or sooner if the patient develops cardiovascular clinical signs.

**SPECIES**

Feline

Standard perioperative fluid rates should be well tolerated. Medications like Ketamine are best avoided. Anticholinergics can be used in the case of a clinically significant bradyarrhythmia. No activity restriction is warranted for this patient as well.

**BREED**

DMH

**SEX**

Spayed Female

**AGE**

8 Years

**WEIGHT**

9.7 pounds

**INTERPRETED BY**

Camden Rouben,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

Cole England DVM

**HOSPITAL NAME**

Blue Cross Animal  
Clinic

**REFERRING VET**

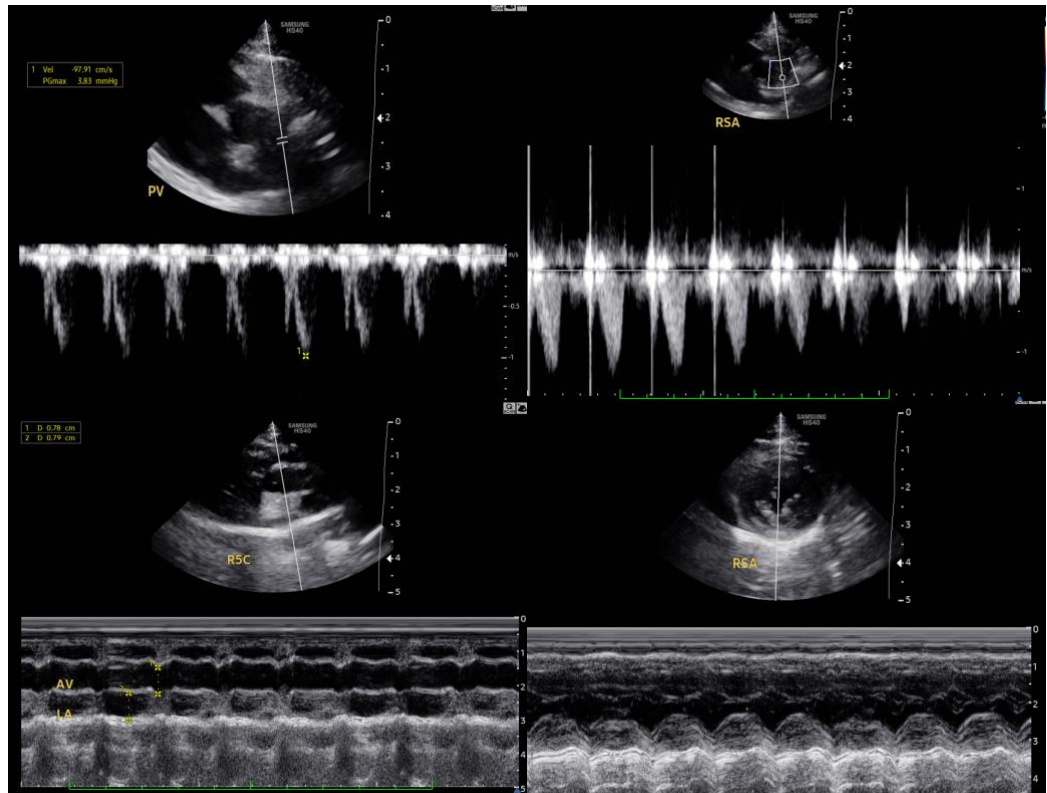
Dr. Karah Markins

**INVOICE**

12149

**DATE**

11/07/25



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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.

Camden Rouben, DVM, DACVIM (Cardiology)

[info@SonoPath.com](mailto:info@SonoPath.com)