



PATIENT

Cami Cirino

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

8 Years 4 Months
(09/01/2017)

WEIGHT

12.94 pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP(CFM), Cert.
IVUSS

IMAGING PERFORMED BY

Dr. Jenni Tudini,
MRCVS, SDEP Cert
(abd)

HOSPITAL NAME

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DATE

01/02/2026

PRESENTING CLINICAL SIGNS

Patient had last echocardiogram performed in 12/24 and monitoring exclusively was advised at that time (SonoPath reported) as no other cause other than a physiologic murmur was determined. Patient was recently see for her annual exam and there was an increased depth to grade of cardiac murmur from a Grade 2-3/6 to a clear 3/6. There was no cardiac murmur ausc prior to scan. Given that patient also displayed a rise in her ProBNP level this year it was advised to recheck her cardiac status.

Abnormal PE/Chem/CBC/UA Results: CBC: Mild increase in monocytes and basophils Biochem: unremarkable ProBNP: 1104 (0-100), same level in 12/24 was 496 Outside of cardiac murmur I did not find any abnormal p/e findings.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

| FELINE CARDIAC PARAMETERS | EPSS | 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 | 0.1 | 208 | 0.61 | 1.6 | 0.5 | -- | -- |
| 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 | 1.3 | 1.3 | 1.4 | | 1.2 | -- | 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 | | | | | | | |

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. Trivial **mitral** insufficiency was noted in this patient yet not clinically significant. The **left ventricle** presented normal volumes and adequate contractility with slight left ventricular septal hypertrophy. Mild **myocardial** remodeling was noted. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. Minor **tricuspid** insufficiency was noted in this patient yet not clinically significant. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** velocity was mildly excessive at 2.0 m/s with a dagger type appearance consistent with DR VOTO noted on the prior echocardiogram. No visible **pericardial** or free pleura fluid was noted or extra cardiac pathology in the visible planes. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.

ULTRASONOGRAPHIC FINDINGS



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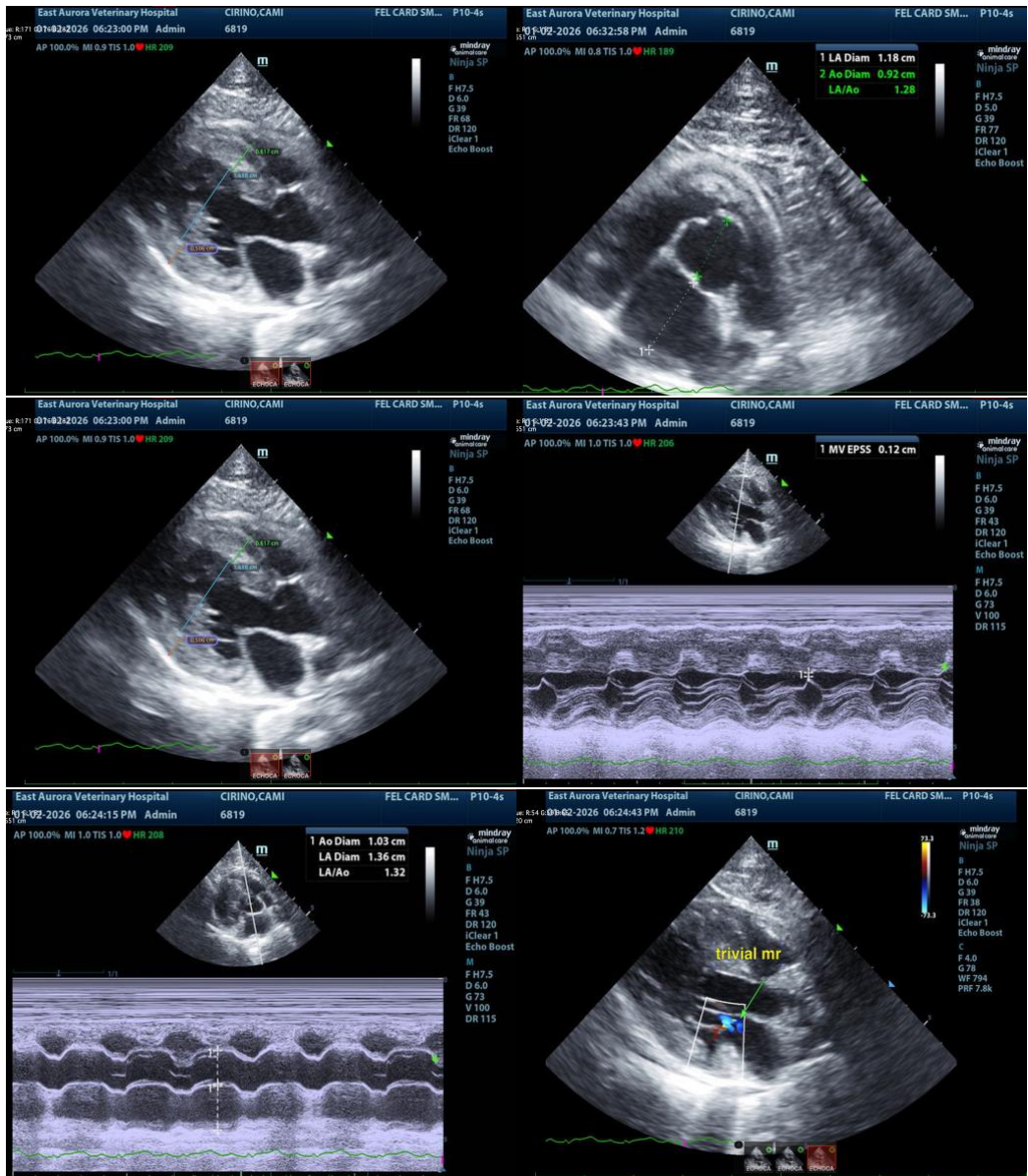
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- Flow murmur with left ventricular myocardial remodeling.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is some minor sectorial hypertrophy of the left ventricular septum. Measurements will change based on position of measurement, yet no evidence of significant disease was noted. No evidence of dynamic obstruction of the left ventricular outflow tract. Monitoring of the thyroid and any systemic hypertension would be warranted.





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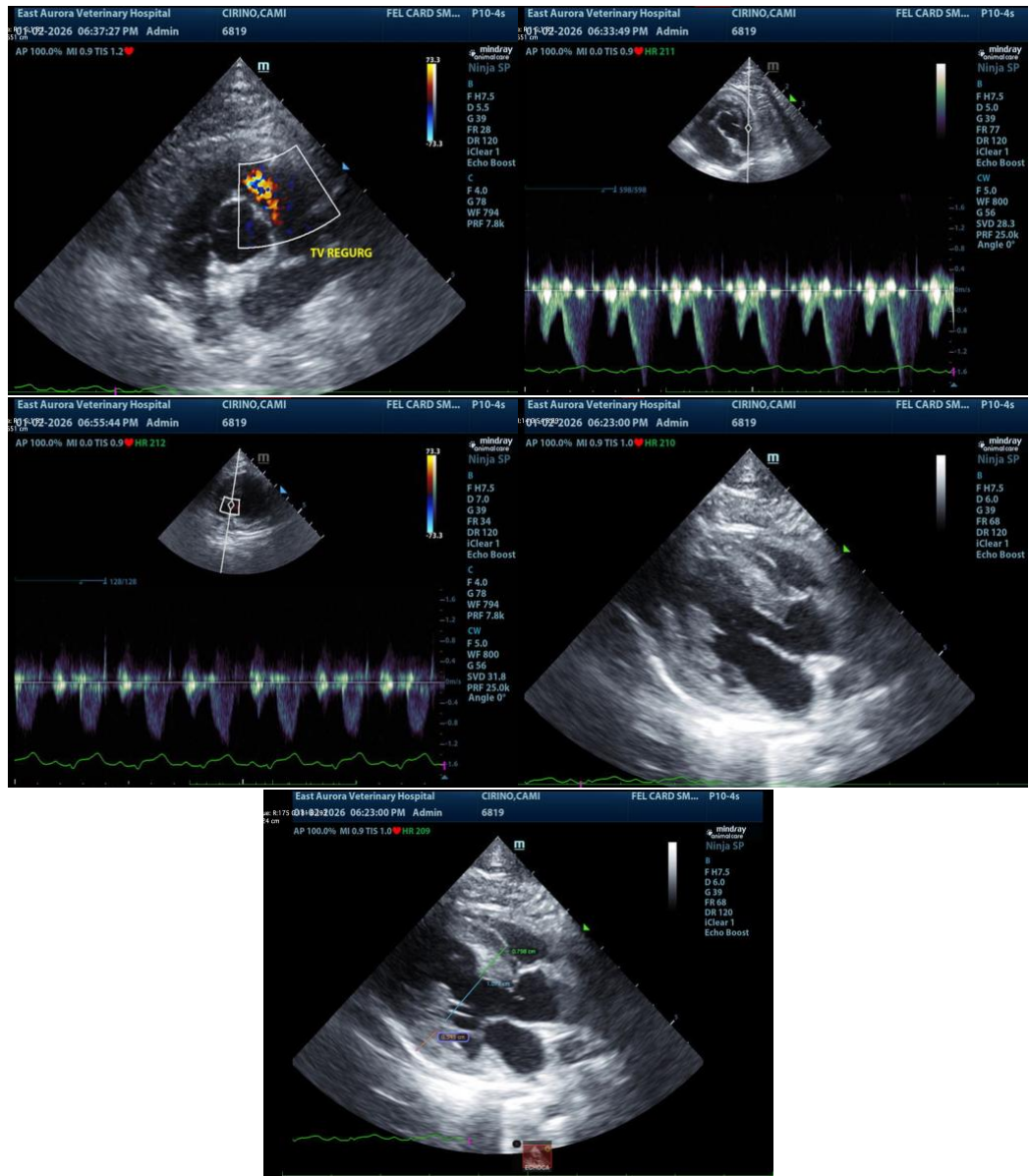
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS,

CEO, Owner, Founder -- SonoPath.com

info@SonoPath.com



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