



PATIENT

Finn Blackburn

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

3 years

WEIGHT

9.78 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Anleu

HOSPITAL NAME

Ellwood AH

REFERRING VET

Dr. Anleu

INVOICE

70891

DATE

1/22/26

PRESENTING CLINICAL SIGNS

- P was referred to us from rDVM d/t needing echocardiogram and cardiologist not able to see P until early May.
- P presented to ER on 1/7/26 for sneezing. upon X-rays could not r/o CHF or pneumonia. air bronchogram caudal lung lobes, concern for non-structured interstitial pattern cranial ventral lung lobes, mild bronchial pattern. ProBNP: 1499
- P was sent home with Clavamox (62.5mg) 1 tab PO BID, Lasix (12.5mg) 1/2 tab PO BID, Clopidogrel (75mg) 1/4 tab PO SID, Maropitant Citrate (24mg) 1/2 EOD
- P represented to rDVM on 1/17/26 for trouble/rapid breathing. Not panting but rapid breathing.
- X-rays were sent out for review at rDVM and radiologist agreed with concern for CHF, and agrees cannot entirely rule out chronic bronchitis on top of this.
- P was not shaved or sedated d/t stress level and limited patience
- Blood Pressures: Lt rear Avg: 118/82 MAP: 91 Rt rear Avg: 108/76 MAP:81

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient presented volume overload of the left and right heart with mild pericardial effusion and tachycardia. Mitral and tricuspid insufficiency are noted. Pulmonary edema lines are also noted consistent with left-sided heart failure. Septal and free wall thicknesses were largely unremarkable with only slight thickening of the left ventricular free wall are present. Contractility appeared adequate. Slight pericardial effusion was noted.

FELINE CARDIAC PARAMETERS	BODY WEIGHT	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	9.78 lbs	194	0.4	1.5	0.68	45	80
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	>3.0	3.0	1.86		-	1.92	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							

ULTRASONOGRAPHIC FINDINGS

Cardiomyopathy with left-sided heart failure and slight pericardial effusion.



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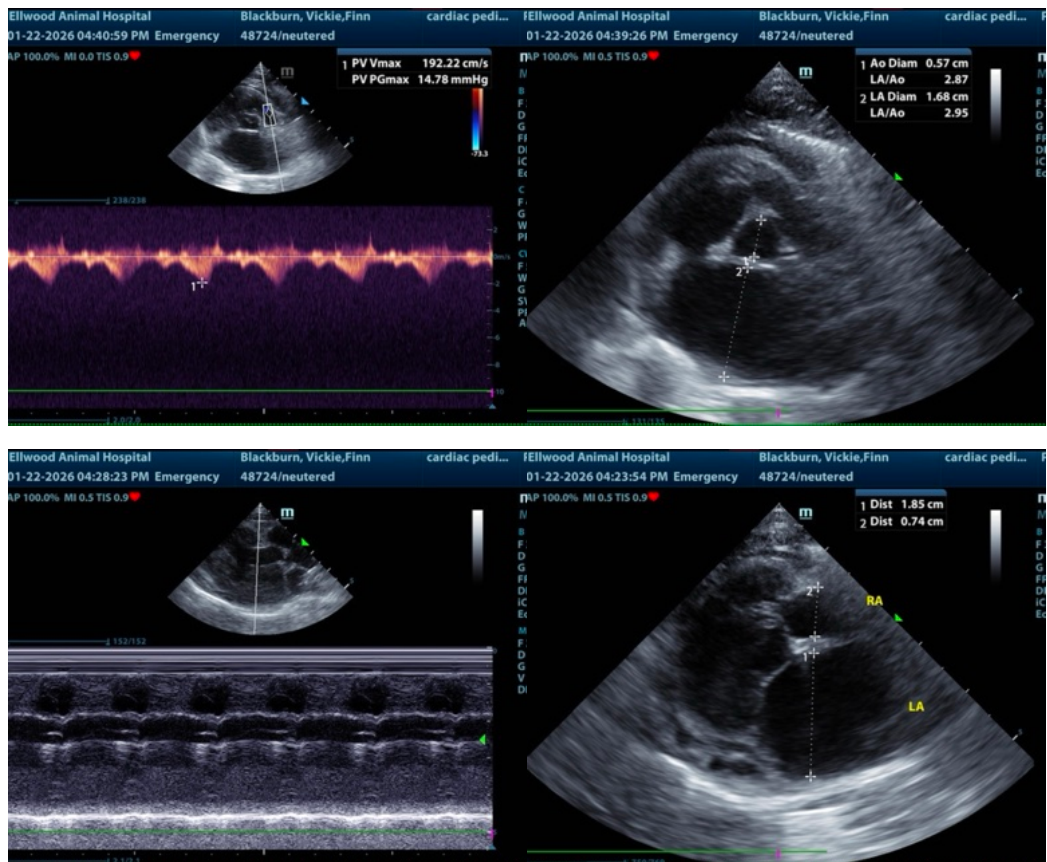
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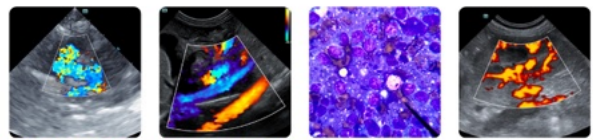
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Scanning of the abdomen is indicated to assess for passive congestion of the liver. There is a possibility of myocarditis in this patient or infectious agents. I recommend continuation of Lasix up to 12.5 mg b.i.d. if necessary. Continuation with Plavix therapy is recommended. Off label use of Pimobendan can be considered at 0.3 mg/kg b.i.d., ace inhibitor at 0.5 mg/kg s.i.d. is recommended. Causes of infectious agents in your region should be considered such as Bartonella and viral disease. Broad spectrum antibiotics such as Azithromycin should be considered as well or Clindamycin. Recheck echocardiogram is recommended in 2-4 weeks depending upon the response to therapy. Oxygen and heat support is indicated as well as cage rest. Prognosis is guarded.





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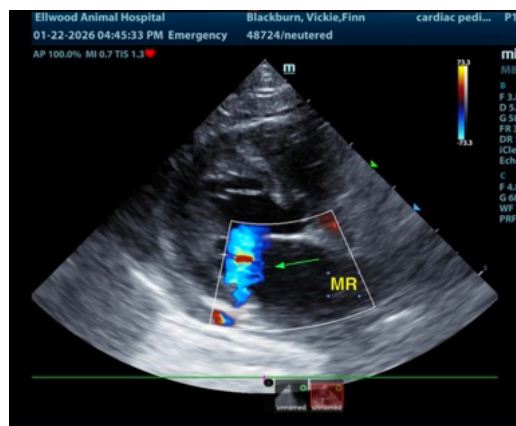
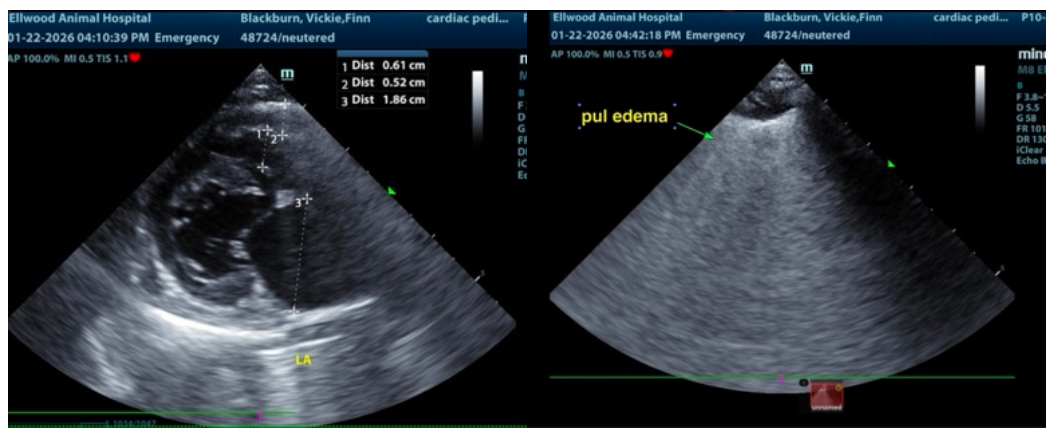
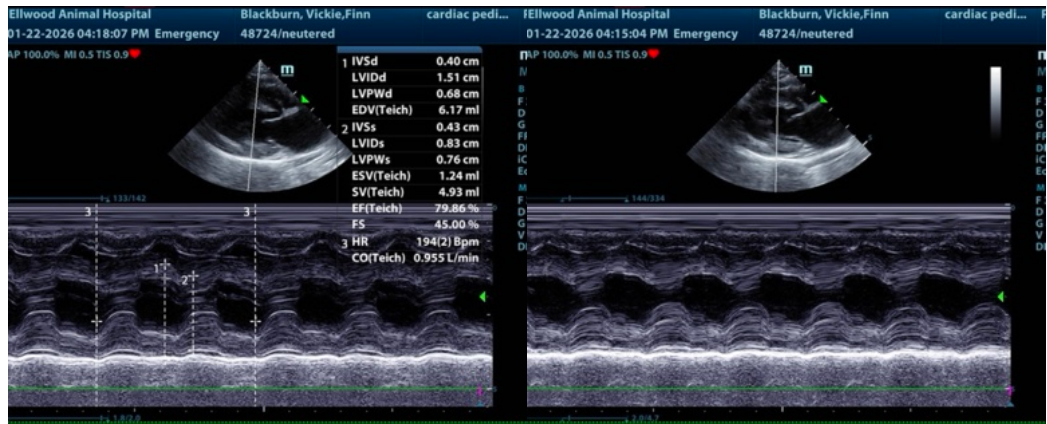
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 of SonoPath.com



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info@SonoPath.com

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