



PATIENT

Moose Oberpriller

SPECIES

Feline

BREED

Maine Coon

SEX

Neutered male

AGE

15 years 11 months

WEIGHT

12 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ebersole

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. McGarvey

INVOICE

39981

DATE

10/7/22

PRESENTING CLINICAL SIGNS

History: Presented ADR. Auscultated crackles bilaterally and chest rads have both possible cardiac and lung changes. He has improved on Azithromycin. Gabapentin for sedation.

Abnormal PE/Chem/CBC/UA Results: PE: mild crackles bilaterally, increased respiratory noise over trachea. CBC/Chem/T-4 (6/18/22): K 3.5, TP 8.9, Glob 5.6. RADS (attached). Antech report: heart enlargement and pneumonia (broncopneumonia vs. aspiration etc.) are both present. Not necessarily related.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient demonstrated subjectively small **left atrial** size based on 3 separate LA measurements. The cranial and caudal **mitral** valve leaflets presented normal linear structure and kinetics. The **left ventricle** presented normal thicknesses with linear contour and was not dilated nor restricted. The **myocardium** presented normal echogenicity without subjective evidence of significant fibrotic or ischemic disease. **Contractility** of the ventricular walls was adequate and in normal range for this patient evidenced by the fractional shortening measurement and subjective evaluation of the different regions and angles of the myocardium. The **left ventricular outflow** tract presented a pronounced angle that is typical of age related cardiac rotation. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinetics. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter (approx. 1:1 pa/ao ratio). 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.

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		180	0.6	1.6	0.6	50	90
FELINE CARDIAC PARAMETERS	LA/AO (Boon)	LA/AO HEART BASE (Sisson)	LA 2D 4-chamber long axis AS to FW (Sisson) (cm)	LVOT VEL. (m/s)	RVOT VEL. (m/s)	IVRT (m/)	
NORMAL PARAMETER	<1.5	0.88-1.79	0.7-1.7	<1.6	<1.3	40-60	
PATIENT	1.0	1.0	-	1.6	0.9	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							



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ULTRASONOGRAPHIC FINDINGS

Normal echocardiogram for this breed. The septal and free wall thicknesses are normal.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no evidence of pathology. No contraindication for anesthetic procedure if necessary. Blood pressure measurements are warranted. There is no cardiogenic pathology related to the respiratory history in this patient. The left atrium is subjectively small and the ratios were low normal. Volume contraction/dehydration should be evaluated. Radiographic cardiomegaly may be related to age related rotation of the left ventricular outflow/aortic angle, yet structurally and functionally the heart is of normal size, thickness and structure and potentially even volume contracted.

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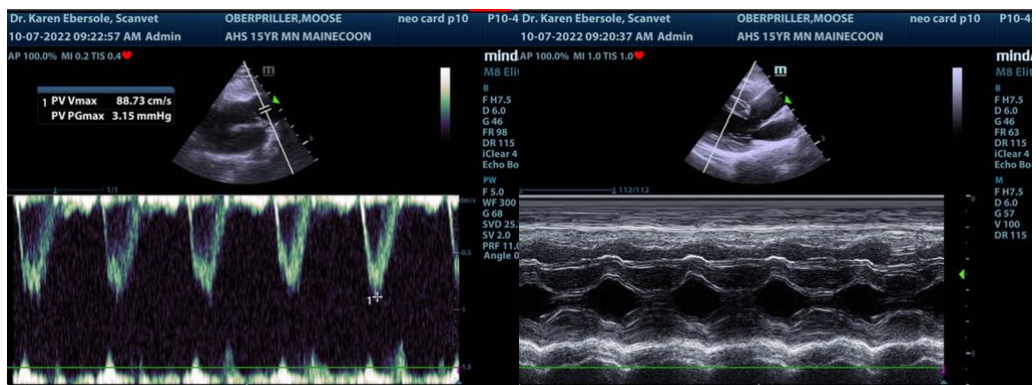
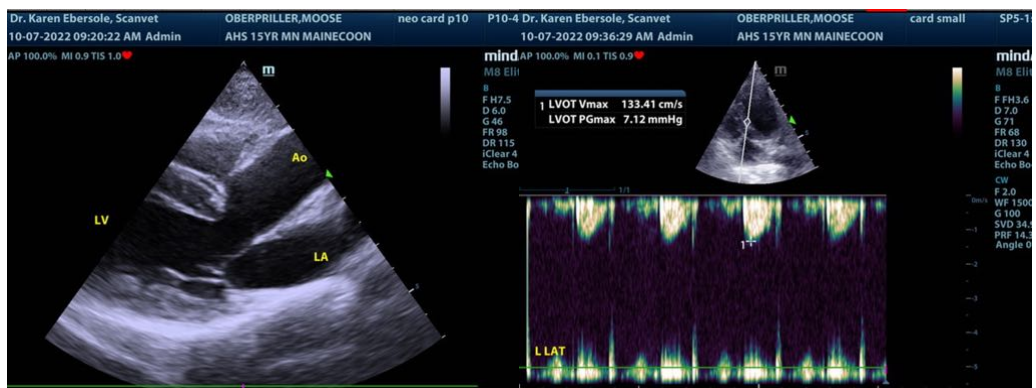
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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info@SonoPath.com

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