



PATIENT

Myrna CLAWS

PRESENTING CLINICAL SIGNS

History: Patient pants all the time with minimal activity, no murmur noted, possible slight enlarged cardiac silhouette on VD radiograph.

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

8 months

WEIGHT

7.6 lbs

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient demonstrated normal **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 demonstrated normal laminar flow and subjective structural integrity. The **right atrium and right auricle** are slightly enlarged; however, overlying 2.0 x 1.5 cm fat deposit was noted. This combination is likely causing the appearance of right-sided enlargement. Trivial **tricuspid** insufficiency was noted in this patient and measured 1.6 m/sec. 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. Approximately 2.0 cm of echogenic heart base fat was noted around the aorta.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Vazquez , CVT

HOSPITAL NAME

Animal General on Hudson

REFERRING VET

Dr. Tierney

| 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 | 7.6 lbs | 115 | 0.48 | 1.52 | 0.48 | 39 | 73 |
| 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 | 1.2 | | 0.87 | 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 | | | | | | | |

INVOICE

94625

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12/15/21



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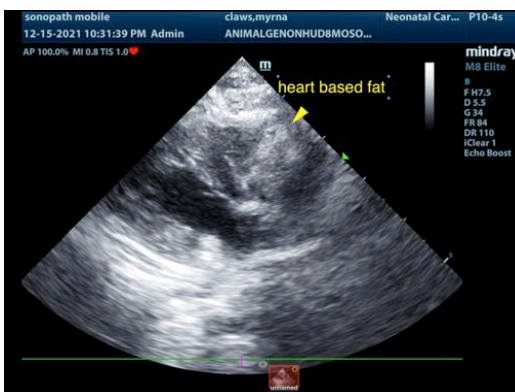
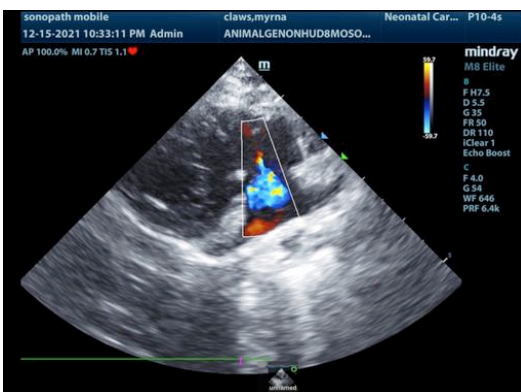
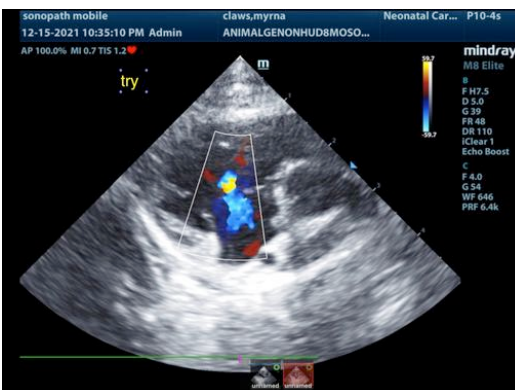
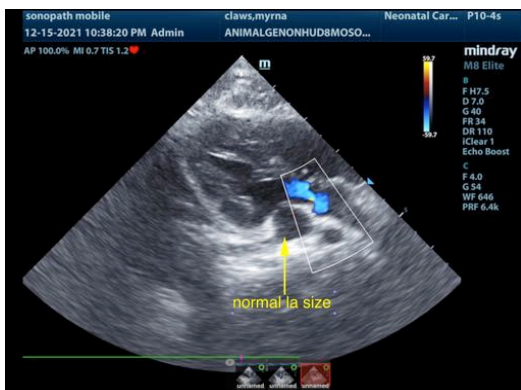
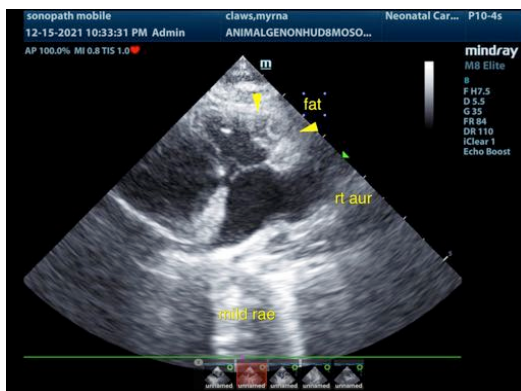
ULTRASONOGRAPHIC FINDINGS

Fat deposits in the chest are likely causing the appearance of cardiomegaly.

Minor tricuspid insufficiency and not likely causing clinical signs. No hepatic vein congestion and no evidence of right sided failure is present.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The heart is essentially normal other than slight right atrial enlargement, tricuspid insufficiency and excessive thoracic fat. I recommend reassessment of the body score and dietary regimen. The exact cause of panting is unclear unless excessive thoracic fat may be playing a role.





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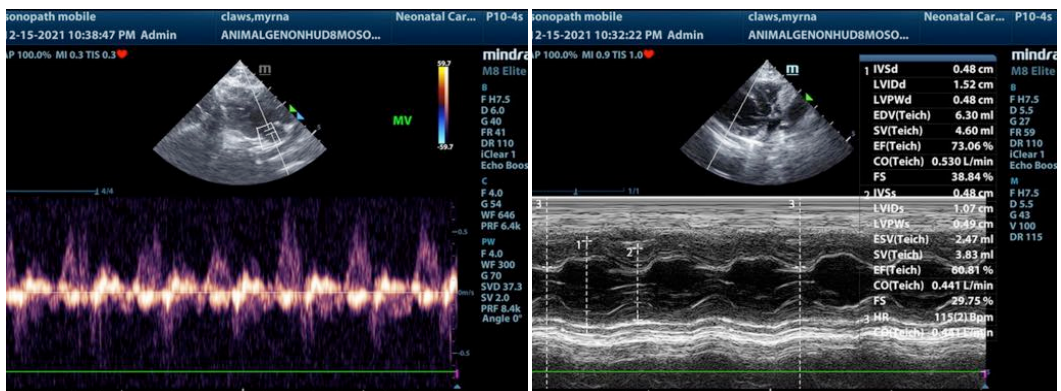
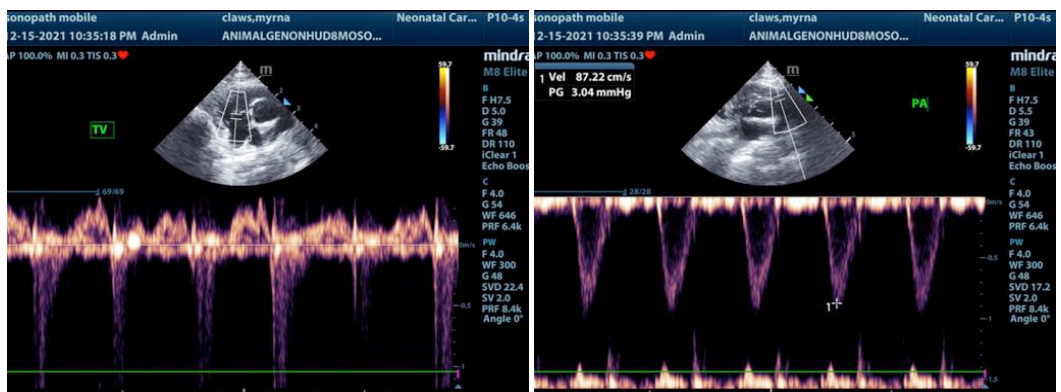
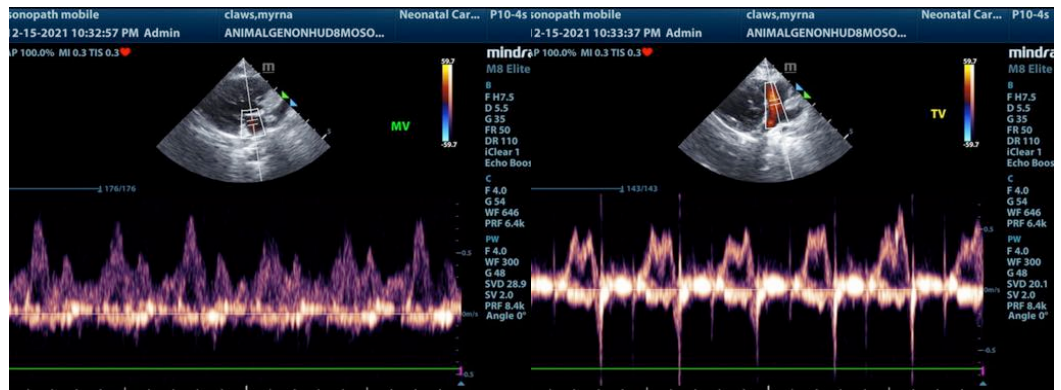
Dr. Tierney

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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.

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, Cert. IVUSS, CEO of SonoPath.com
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