



PATIENT

Billie Coleman

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

9 Years

WEIGHT

4.2 kg

PRESENTING CLINICAL SIGNS

History: Grade 4 murmur. Not hyperthyroid. Normal rhythm.

Abnormal PE/Chem/CBC/UA Results:

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		NM	0.44	1.13	0.52	56%	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		1.3					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							

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dave Stasiuk, RDMS,
RDCS

HOSPITAL NAME

Resolution VU, LTD

REFERRING VET

Signal Hill AC-Dr. Liz
Cumyn

INVOICE

12833

DATE

12/3/21

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size and structure with no evidence of "smoke" or thrombi. The cranial and caudal **mitral** valve leaflets appeared mildly thickened. Stalic anterior motion noted with bidirectional turbulence, both mitral insufficiency and aortic outflow turbulence noted. The **left ventricle** presented sectorial hypertrophy with echogenic myocardial remodeling. The measurements appear normal to abnormal, depending on where measurements are performed. Hypertrophic and remodeled papillary noted. **Contractility** of the ventricular walls was considered excessive for this patient evidenced by the elevated fractional shortening measurement. The **left ventricular outflow** tract demonstrated turbulent laminar flow. Subjective assessment of the **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated linear morphology. The **right ventricle** was of normal size with normal chordae structure, myocardial echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter. No visible **pericardial** or free pleura fluid was noted. No echographically detectable evidence of infiltrative disease was visible. The **mediastinum** was free of masses in the visible window.

ULTRASONOGRAPHIC FINDINGS

- Hypertrophic myopathy with myocardial remodeling and sectorial hypertrophy
- Systolic anterior motion/dynamic left ventricular outflow obstruction, compensated at this time

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If resting heart rate is <200 per minute, then no specific therapy warranted at this time. If any exercise



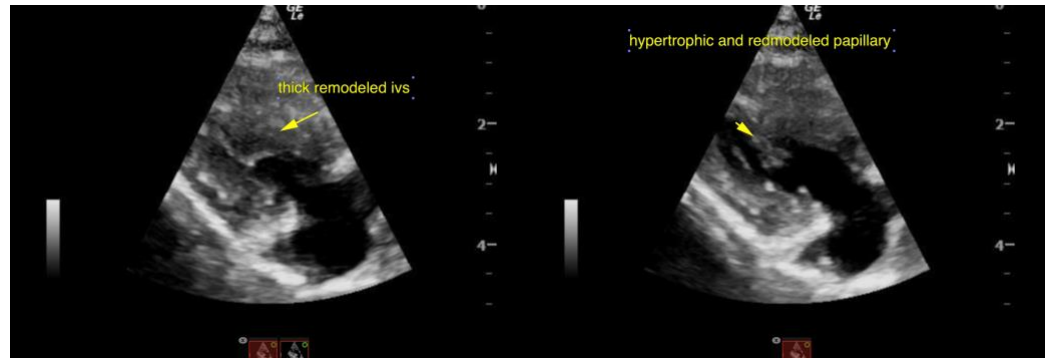
PATIENT

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intolerance is occurring, then atenolol therapy could be considered. Blood pressure measurements are also recommended. Recheck echo in 6 months.

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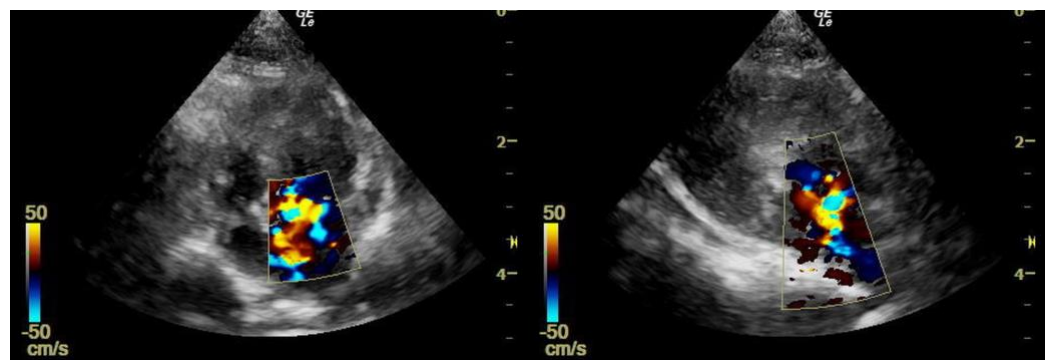
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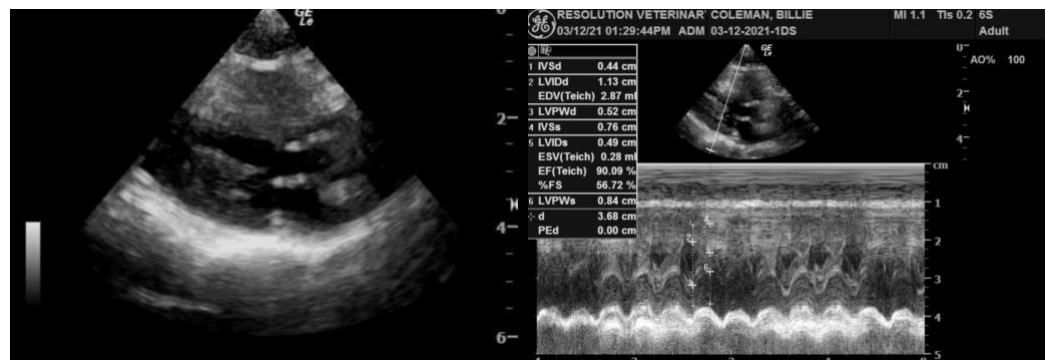


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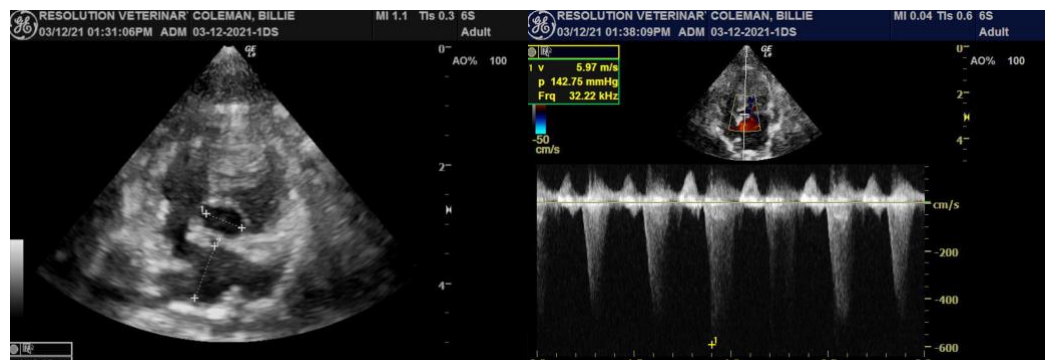


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The information and recommendations provided are based on the images presented by the



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referring veterinarian. 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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