



PATIENT

Milo Dadarria

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years 9 Months

WEIGHT

9.4 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jenni Tudini,
MRCVS, SDEP cert
(abdomen)

HOSPITAL NAME

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Veterinary Practice

REFERRING VET

Dr. Megan Dudek

INVOICE

12660

DATE

12/09/25

PRESENTING CLINICAL SIGNS

Patient recently examined for routine physical (new patient) and owner noted that patient had previously been noted to have had a Grade II/VI cardiac murmur. Patient does having a cough fit every 3 weeks or so but otherwise appears in good health. Patient was found to have had a notable increase in the grade of murmur ausc during most recent exam and so owner wished to proceed with further work up.

Abnormal PE/Chem/CBC/UA Results: Cardiovascular Notes: - Normal rate and rhythm auscultated. - Grade IV/VI parasternal systolic murmur - Femoral pulses were synchronous and of good quality. CBC - WNL Chem - BUN 44 (16-37), otherwise unremarkable T4/Free T4: WNL U/a: 1.017 otherwise unremarkable BNP: WNL BP: Sys 152 Dia 111 MAP 119

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	0.48	1.25	0.50	50	90
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	1.1	1.17	--		--	0.80	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							

EPSS: 0.1

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. Trivial MR mitral insufficiency was noted in this patient. 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 auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. Trivial **tricuspid** valve insufficiency was noted measuring 1.7 m/s yet not clinically significant. 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.



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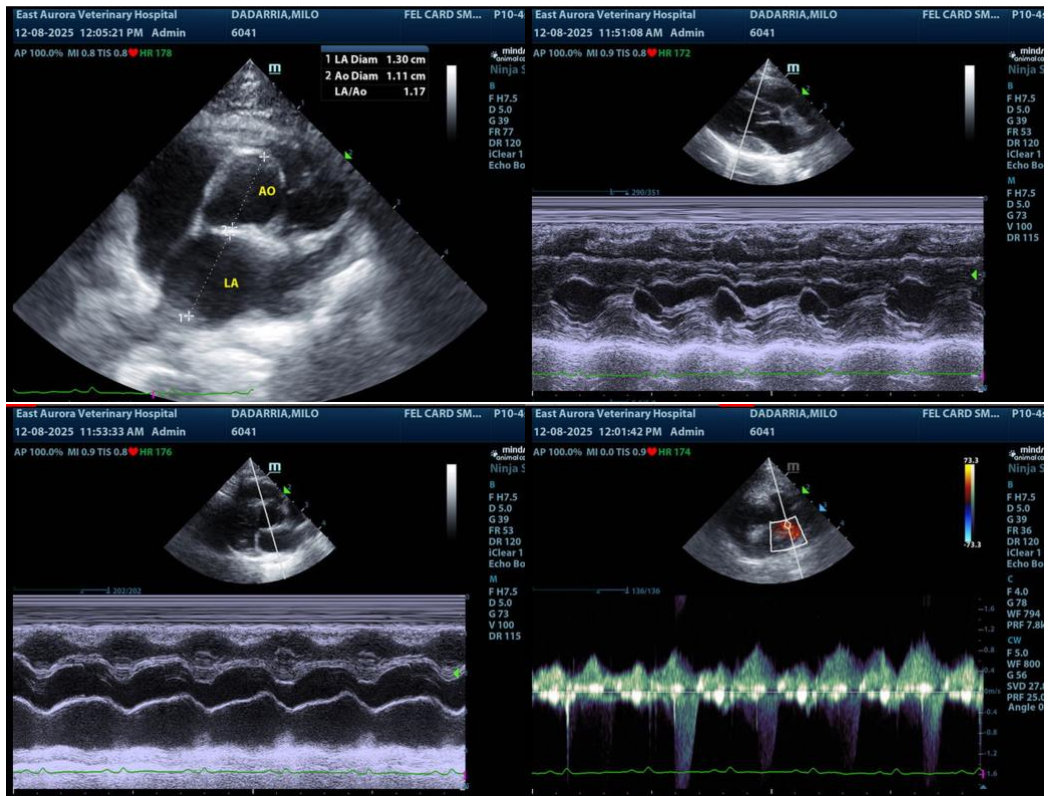
12/09/25

ULTRASONOGRAPHIC FINDINGS

- Normal echocardiogram.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of cardiac disease influencing the clinical signs. The cough is noncardiogenic in origin. Feline bronchial disease and/or heartworm should be considered.





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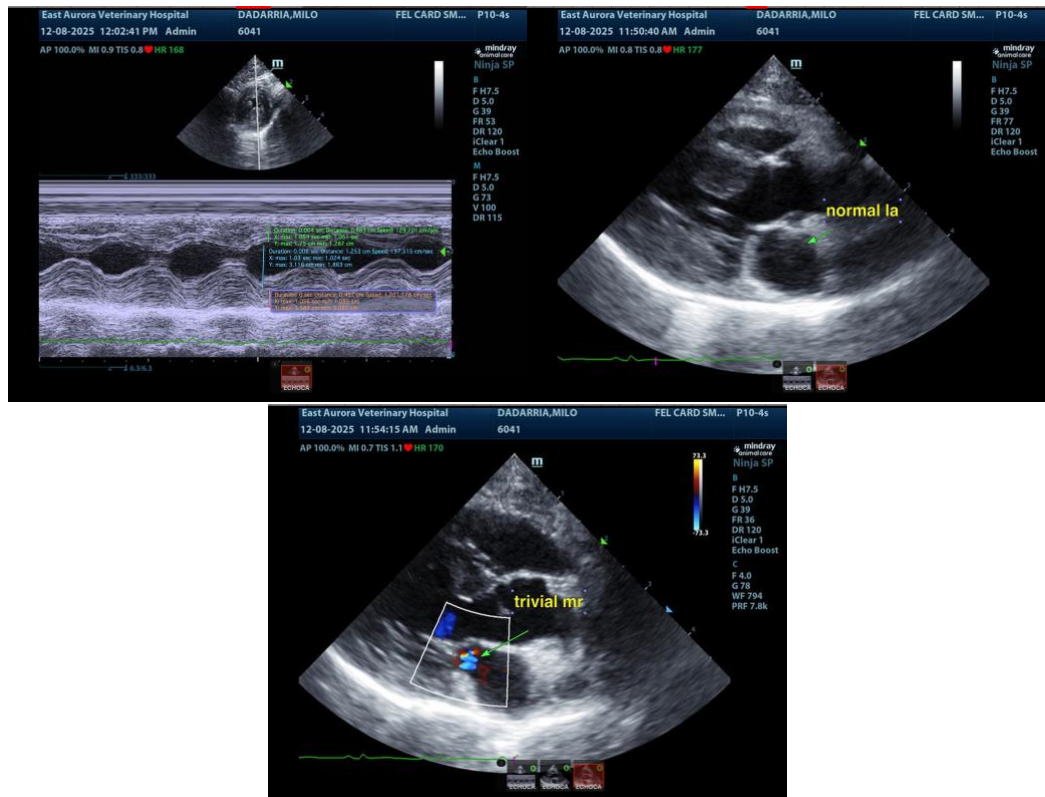
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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. IVUS,

CEO, Owner, Founder -- SonoPath.com

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