



PATIENT

Dottie Penney

SPECIES

Feline

BREED

Scottish Fold

SEX

Spayed Female

AGE

7 Months

WEIGHT

2.5 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Dan Quinlan

HOSPITAL NAME

Dr. Dan Quinlan

REFERRING VET

Dr. Dan Quinlan

INVOICE

21009

DATE

2/5/23

PRESENTING CLINICAL SIGNS

History: This is a 7-month-old, five-pound, female spayed Scottish Fold presented for a new murmur (not picked up earlier with breeders' vet). Murmur is systolic and 3/6 in intensity. Although a good kitty, she was stressed and obstreperous requiring sedation with some butorphanol and diazepam. Sedation had a mild affect. Images were only fair. The ECG would not work with Dottie both for technical and tolerable issues.

*15 still images and 2 videos were submitted in AVI format. Please submit in DICOM for complete evaluation.

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	--	205	0.48	1.24	0.5	54	88
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	--	--	--	1.20	--	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							

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. Minor sectorial hypertrophy was noted in this patient with mitral insufficiency (5.3 m/s) and minor systolic anterior motion. Minor clubbing of the mitral valve leaflets noted. It appears a small false tendon may also be present; however, this is compensated. 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. **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



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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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- Compensated mitral insufficiency with minor systolic anterior motion
- Minor form of hypertrophic cardiomyopathy phenotype- not clinically significant at this time
- No volume overload noted
- Heart rate appears to be contained

BREED

Scottish Fold

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recheck echo in 6-12 months is recommended. If exercise intolerance becomes an issue, then atenolol therapy could be considered. However, the cardiac presentation is not likely a clinical issue at this time.

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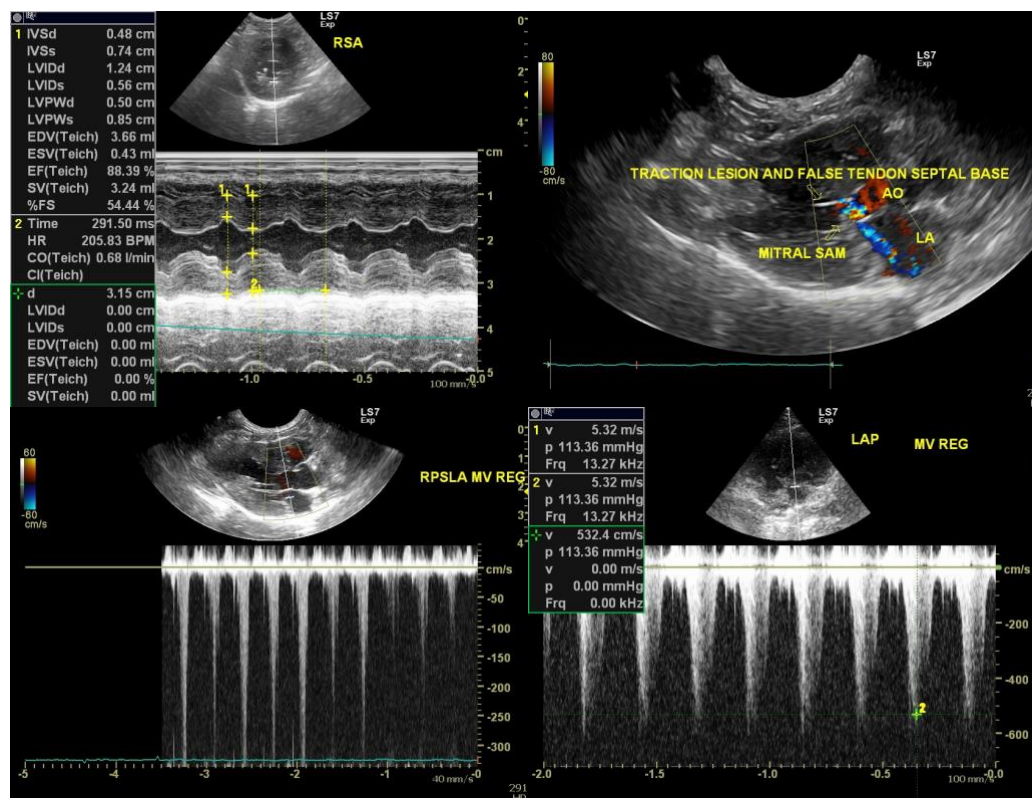
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@SonoPath.com

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