



PATIENT

Tami Anoud

SPECIES

Feline

BREED

Cross Breed

SEX

Feline

AGE

1 Year 11 Months

WEIGHT

3.52

PRESENTING CLINICAL SIGNS

History: Presented with dyspnea and grade 4HM which was heard about an year also. Feline proBNP test result was abnormal. A tentative diagnosis of CHF was made and furosemide was started. Cardiac US was done when the patient's respiratory rate reduced from 90BPM to 58BPM in 4 hours

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	0.47	2.05	0.42	45	79
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	2.0	1.7	1.85	1.19	2.04	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

Inam ul haq, DVM,
MRCVS

HOSPITAL NAME

City Veterinary Clinic,
Abu Dhabi, Khalifa City

REFERRING VET

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INVOICE

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Cardiac Presentation

The cardiac presentation in this patient presented normal septal and free wall thickness and adequate contractility. However, ventricular septal defect was evident. Mitral insufficiency was present with minor volume overload of the left atrium. The ventricular septal defect was fairly large (5.0 mm) with both left and right sided flow. The septal leaflet of the tricuspid valve was thickened and dysplastic. The right ventricle presented mild hypertrophy with excessive right ventricular outflow velocity, which is like a compensatory mechanism, which is compensatory elevated velocity given the volume overload. Minor pulmonic insufficiency was also noted. No pericardial or pleural effusion were noted, however, some ringdowns were present in the pulmonary field, suggestive for pulmonary disease, likely edema. Hepatic veins were not dilated.

ULTRASONOGRAPHIC FINDINGS

- Ventricular septal defect with quadra chamber volume overload and compensatory elevated RVOT velocity
- Mitral insufficiency with mild left atrial enlargement

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend continuation of Lasix therapy Pimobendan could be considered 0.3 mg/kg BID. Plavix therapy would be indicated. Recheck echocardiogram in 2-4 weeks if the patient is stable, or earlier if the patient is decompensating. Prognosis is guarded. This is a primary congenital lesion; the breeding line should be evaluated for similar anomalies. This is a breeding stock.



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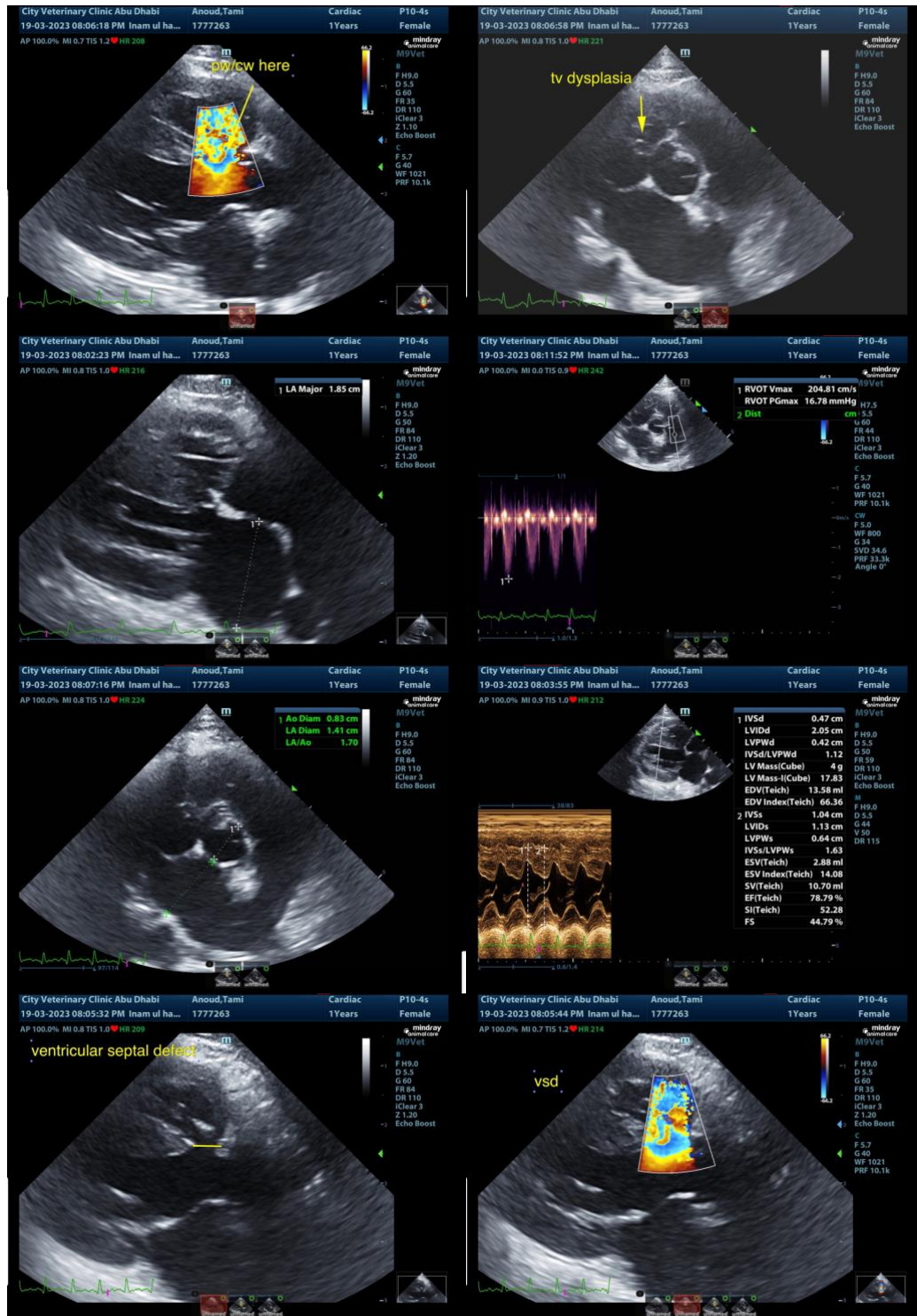
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not



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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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