

**PATIENT**

Peanut Rovere

**SPECIES**

Feline

**BREED**

Tuxedo

**SEX**

Spayed Female

**AGE**

12 Years 6 Months

**WEIGHT**

13.8 pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Vincent Ravancho CVT

**HOSPITAL NAME**

Legacy Animal Hospital

**REFERRING VET**

Dr. Potenzone

**INVOICE**

14165

**DATE**

03/09/26

**PRESENTING CLINICAL SIGNS**

- BNP 1280
- Hyperthyroid
- Baseline Heart Screen
- Current medications - methimazole

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

FELINE CARDIAC PARAMETERS	BODY WEIGHT (lbs)	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	13.8	170	0.5	1.4	0.5	50	--
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	--	1.3	1.2	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							

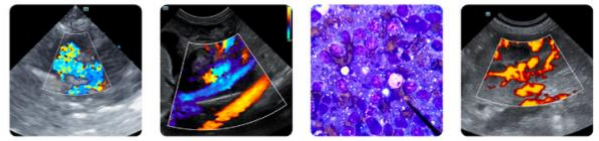
EPSS: 0.1 // E-wave Velocity: 0.9

**Cardiac Presentation**

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. The cranial and caudal **mitral** valve leaflets revealed trivial mitral insufficiency. 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. **Tricuspid** valvular assessment demonstrated trivial insufficiency. 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.

**ULTRASONOGRAPHIC FINDINGS**

- Normal echocardiogram.
- Trivial tricuspid/mitral insufficiency.



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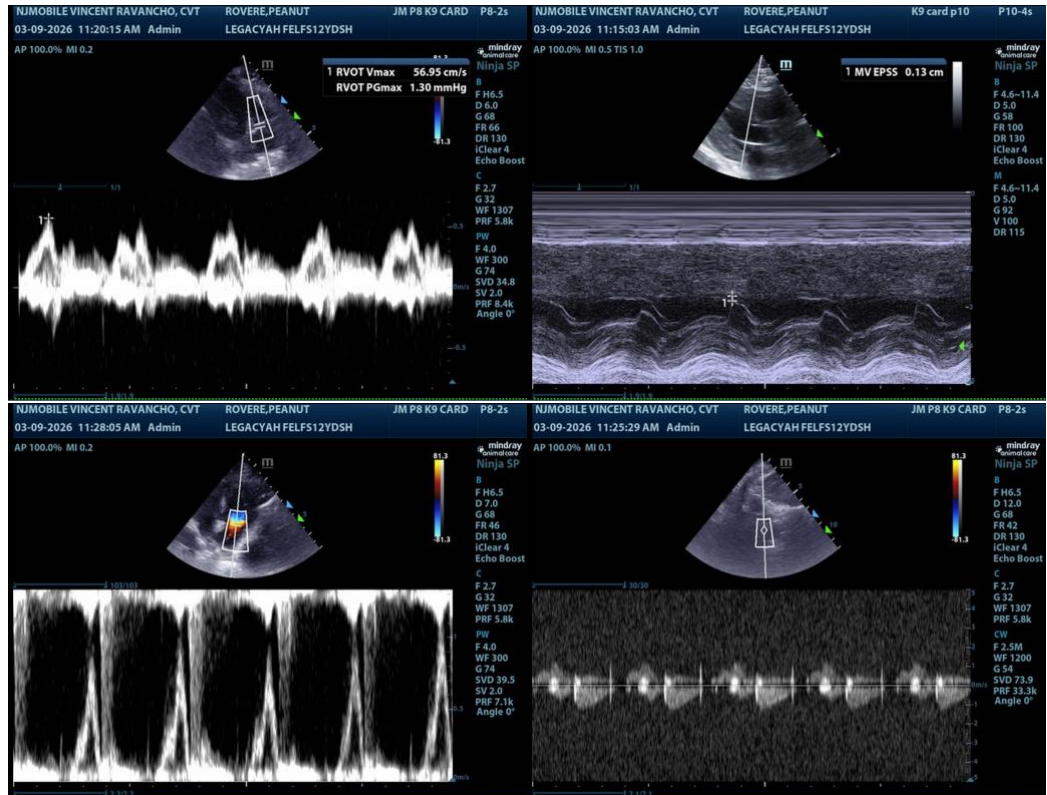
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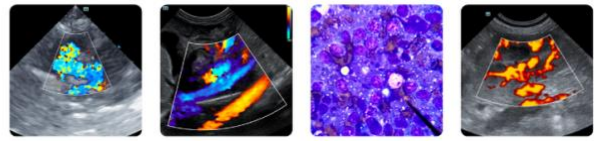
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No contraindication to anesthetic procedure if necessary. Hyperthyroid may be playing a role in the BNP elevation. Blood pressure measurements also indicated. Management of hyperthyroidism to ensure thyroid levels are within normal limits.





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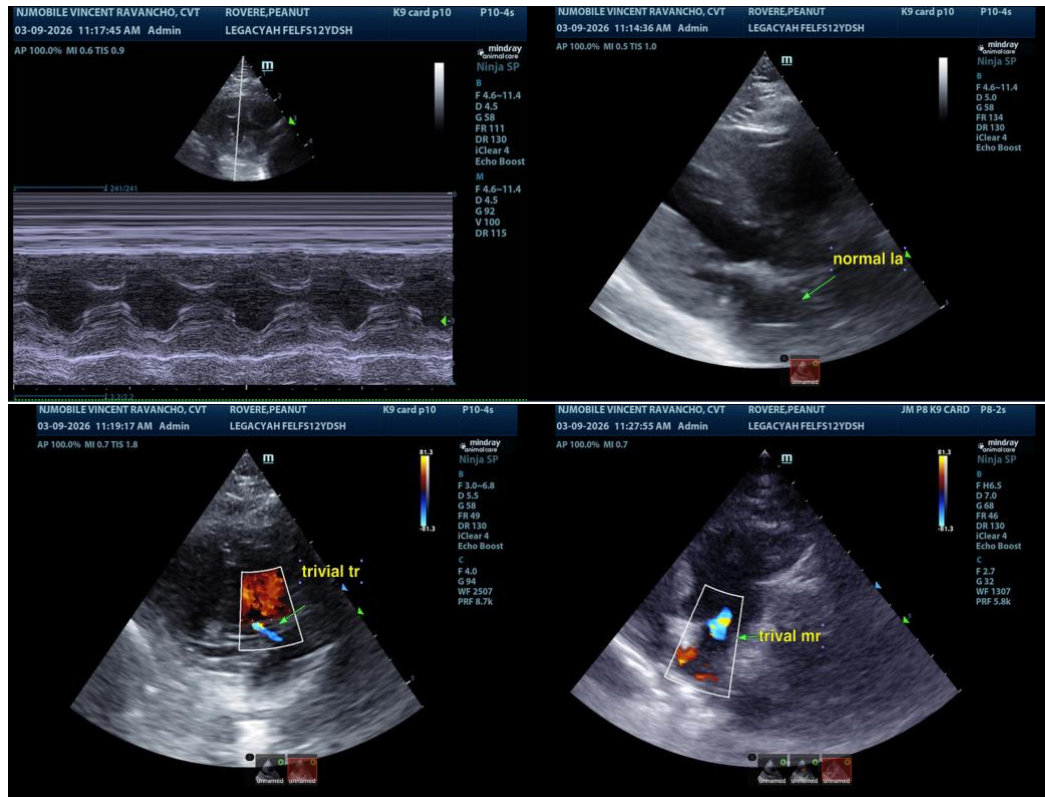
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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. IVUSS,**

CEO, Owner, Founder -- SonoPath.com

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