



PATIENT

Muffin Austin

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

9 Years

WEIGHT

4.4 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Animal Emergency
 Clinic of the High
 Country

REFERRING VET

Dr. Phipps

INVOICE

15240

DATE

04/20/26

PRESENTING CLINICAL SIGNS

P presented for gagging and trouble swallowing after being given Doxycycline. Lethargy and decreased appetite. At rDVM P had fever and elevated WBC count.

Rad report- there is a bronchointerstitial pulmonary pattern, few pleural fissure lines seen. SQ emphysema with soft tissues dorsal to thorax.

Abnormal PE/Chem/CBC/UA Results: ProBNP abnormal Panc lipase 1 (0-4.4)

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	4.4	171	0.31	1.59	0.40	68	95
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	1.4	1.37	1.36	1.44	0.81	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							

E-wave Velocity: 1.2 // EPSS: 0.1

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. Trivial **mitral valve** insufficiency was present. 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). A 1.6 cm x 0.76 cm lung consolidation was present with irregular surrounding pleural tissue. A moderate amount of pleural effusion was also present. The pleural effusion is non-cardiogenic as the left atrial size is maintained in normal range.

ULTRASONOGRAPHIC FINDINGS

- Trivial mitral and tricuspid insufficiency.



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- Pleural effusion.
- Lung consolidation with irregular pleural tissue- suggest for a neoplastic process.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the age of the patient, wet form FIP is unlikely. I am more concerned about thoracic carcinomatosis or similar. Chest CT would be ideal along with immediate cytospin and pleurocentesis sample with slide preparation. Abdominal sonogram is recommended to assess for primary disease that may be metastatic to the chest.

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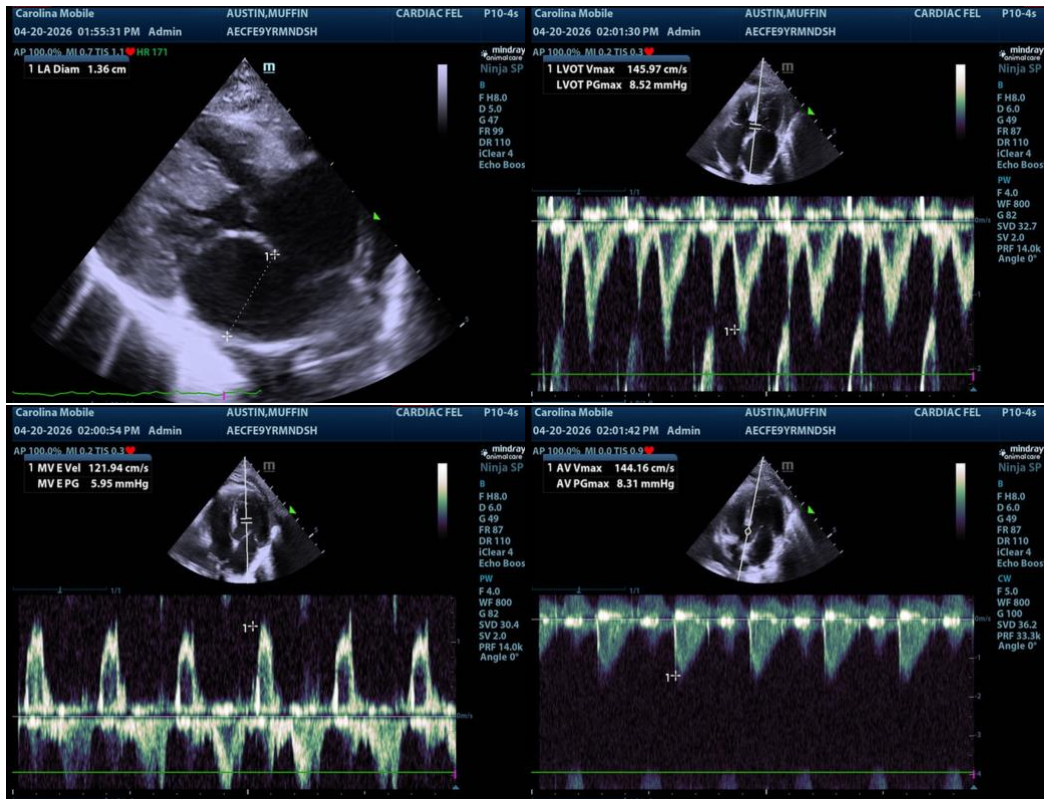
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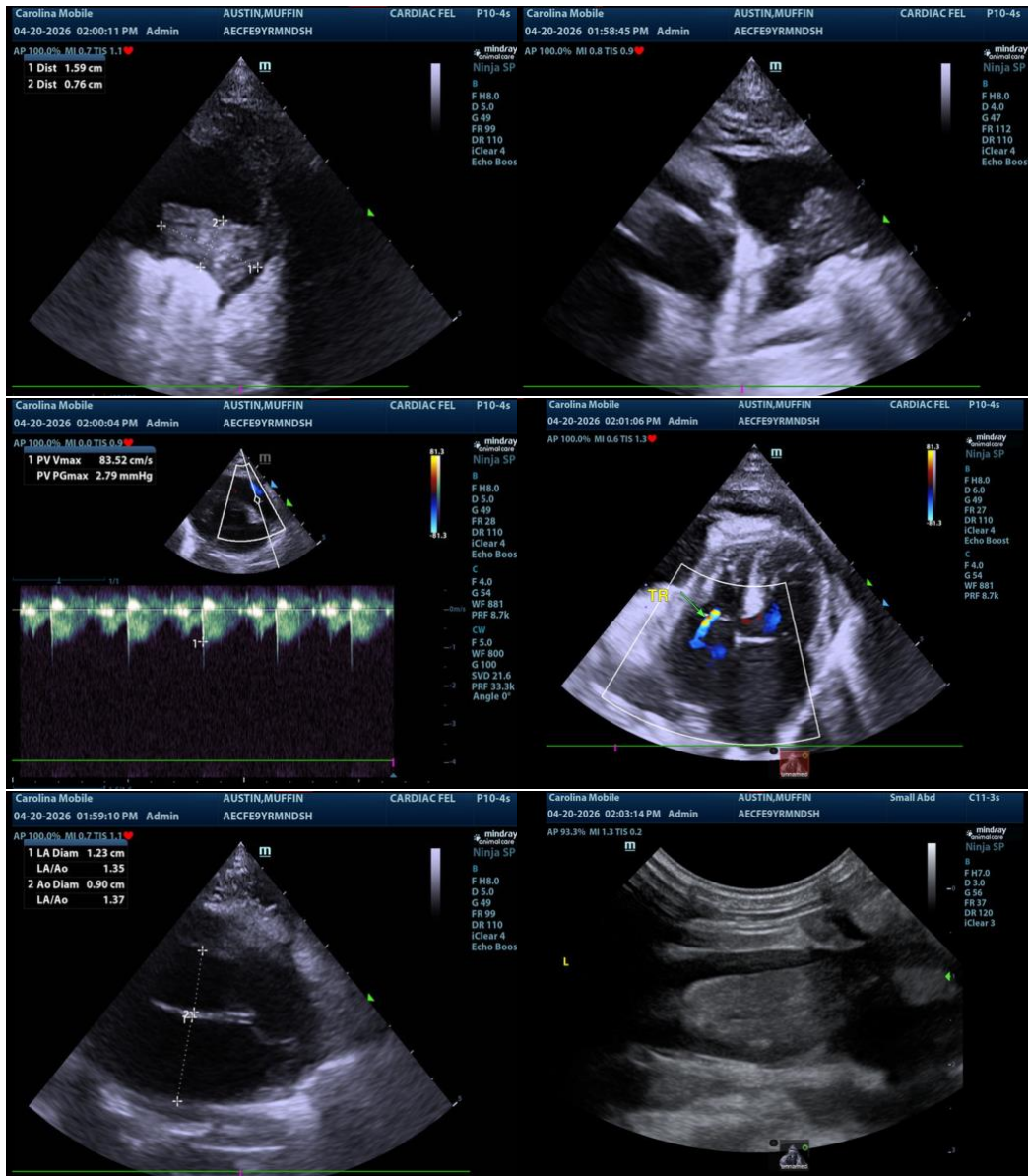
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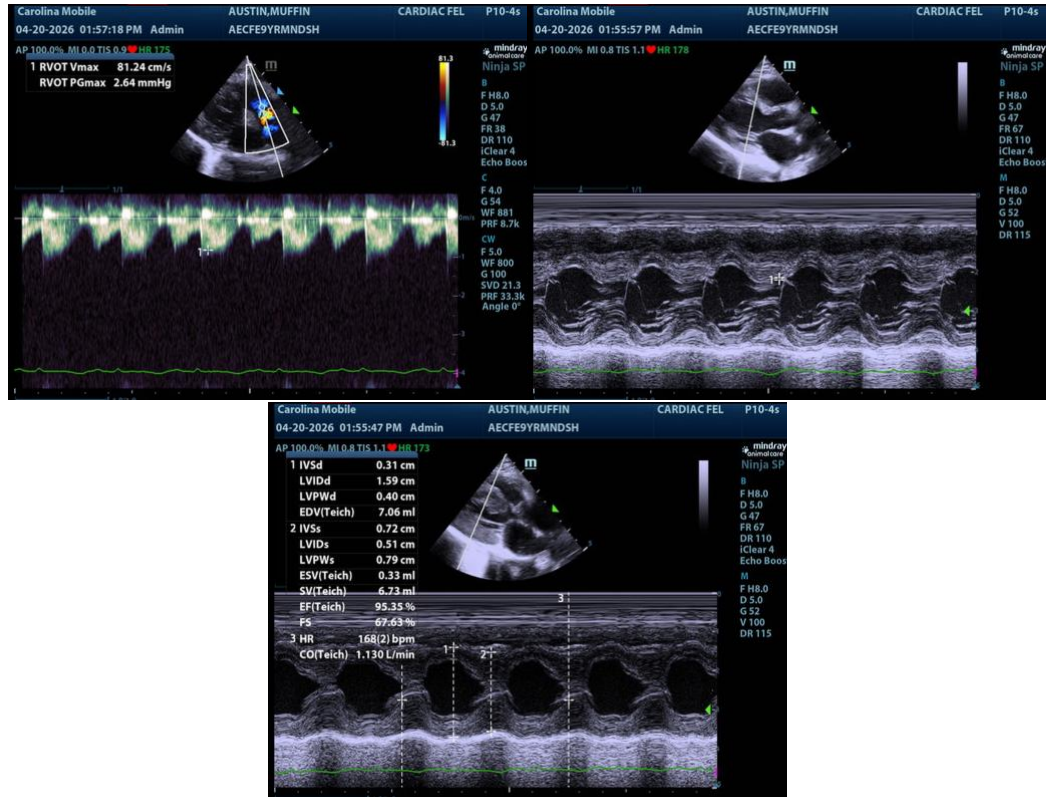
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,

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