



## PATIENT

Kalli Musacchio

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed female

## AGE

14 years

## WEIGHT

11.76 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Heather

## HOSPITAL NAME

Animal Care Center of  
Flanders

## REFERRING VET

Dr. Hallihan

## INVOICE

78154

## DATE

5/29/26

## PRESENTING CLINICAL SIGNS

History: grade 2/3 systolic murmur ausculted 5/13 (1st visit) - "slowing down"  
taking dasuquin 3 caps daily  
SDMA - 15, glu - 197, cardiac probnp - 441, hookworm ag pos on fecal

## ULTRASONOGRAPHIC EXAMINATION OF THE HEART

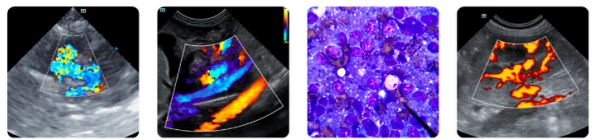
The echocardiogram in this patient demonstrated normal **left atrial** size and structure with no evidence of "smoke" or thrombi. **Mitral** valve leaflets appeared mildly thickened with some insufficiency noted on Doppler. The **left ventricle** presented excessive free wall and septal thicknesses with hypertrophic thicknesses compared to normal for this species. The **myocardium** presented essentially normal echogenicity without immediate signs of fibrotic or ischemic disease. **Contractility** of the ventricular walls was considered excessive for this patient evidenced by the elevated fractional shortening measurement. The **left ventricular outflow** tract demonstrated turbulent laminar flow. Subjective assessment of the **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated linear morphology. The **right ventricle** was of normal size with normal chordae structure, myocardial echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter. No visible **pericardial** or free pleura fluid was noted. No echographically detectable evidence of infiltrative disease was visible. The **mediastinum** was free of masses in the visible window.

FELINE CARDIAC PARAMETERS	BODY WEIGHT	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	11.76 lbs	200	0.61	1.03	0.64	NM	NM
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	1.2	1.4		NM	0.7	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							

## ULTRASONOGRAPHIC FINDINGS

Left ventricular hypertrophy may be owing to hypertrophic cardiomyopathy phenotype.

Mitral insufficiency.



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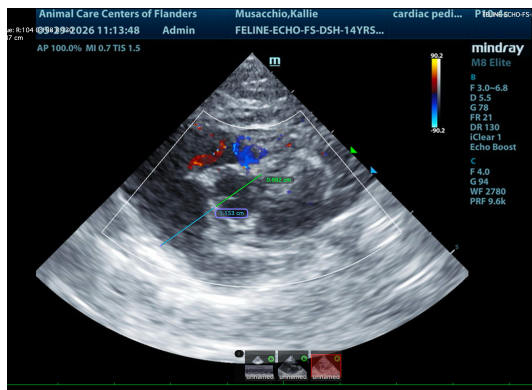
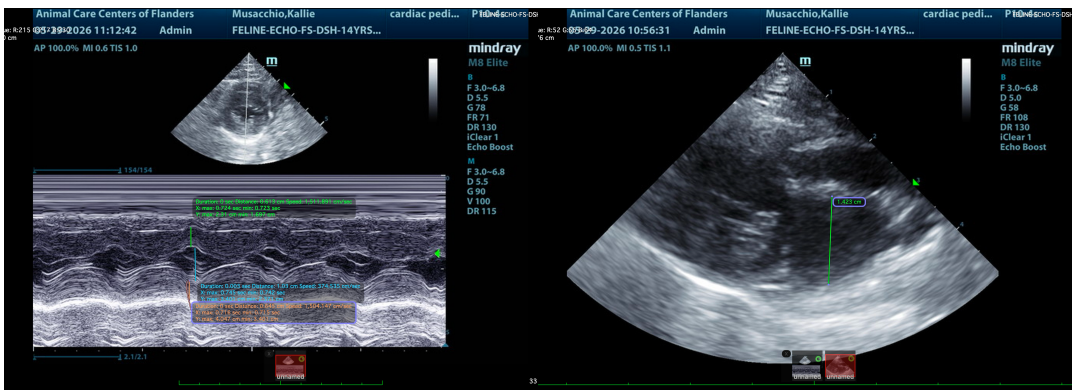
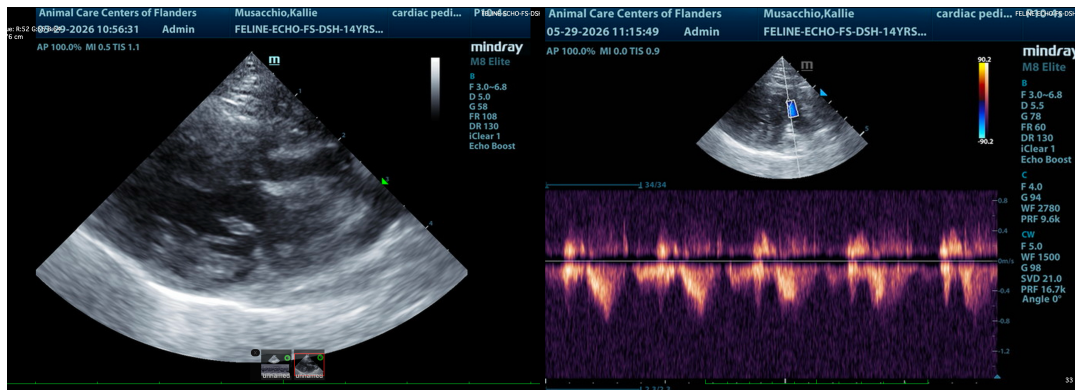
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Other causes such as volume contraction, systemic hypertension, hyperthyroidism, temporary myocardial thickening can all present in this fashion. I do not believe that the heart is the cause of the clinical history. No cardiac therapy is recommended at this time. Given the vague clinical signs, orthopedic exam is recommended to assess for pain related disease, thoracic or CNS disease should all be considered. An abdominal sonogram should also be considered.



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology



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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 of SonoPath.com

[info@SonoPath.com](mailto:info@SonoPath.com)