

PATIENT

Freddy Larson

SPECIES

Feline

BREED

Siamese

SEX

Neutered Male

AGE

14 Years 11 Months

WEIGHT

6.1 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Mariusz
Chmielinski DVM

HOSPITAL NAME

Apex Veterinary
Services LTD

REFERRING VET

Alpine 24/7 ER Doctor

INVOICE

15846

DATE

05/05/26

PRESENTING CLINICAL SIGNS

Echocardiographic evaluation for: Historical mild systolic heart murmur, Chronic intermittent cough/gagging episodes, Assessment prior to potential long-term respiratory therapy. Freddy has a history of: Chronic intermittent coughing/gagging episodes, often while resting/asleep

Abnormal PE/Chem/CBC/UA Results: PE WNL / Mild grade 1- 2/6 systolic heart murmur. PE WNL Mild weight loss, Mild bronchial pulmonary pattern on thoracic radiographs, No radiographic evidence of CHF or cardiomegaly, No pleural effusion, Bloodwork including CBC/Chem/T4 was unremarkable.

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	6.1	NM	0.52	1.8	0.59	50	90
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		1.5	--	0.56	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: 0.5 m/s // 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 noted on color flow assessment. 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 mild insufficiency measuring 1.5 m/s. 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



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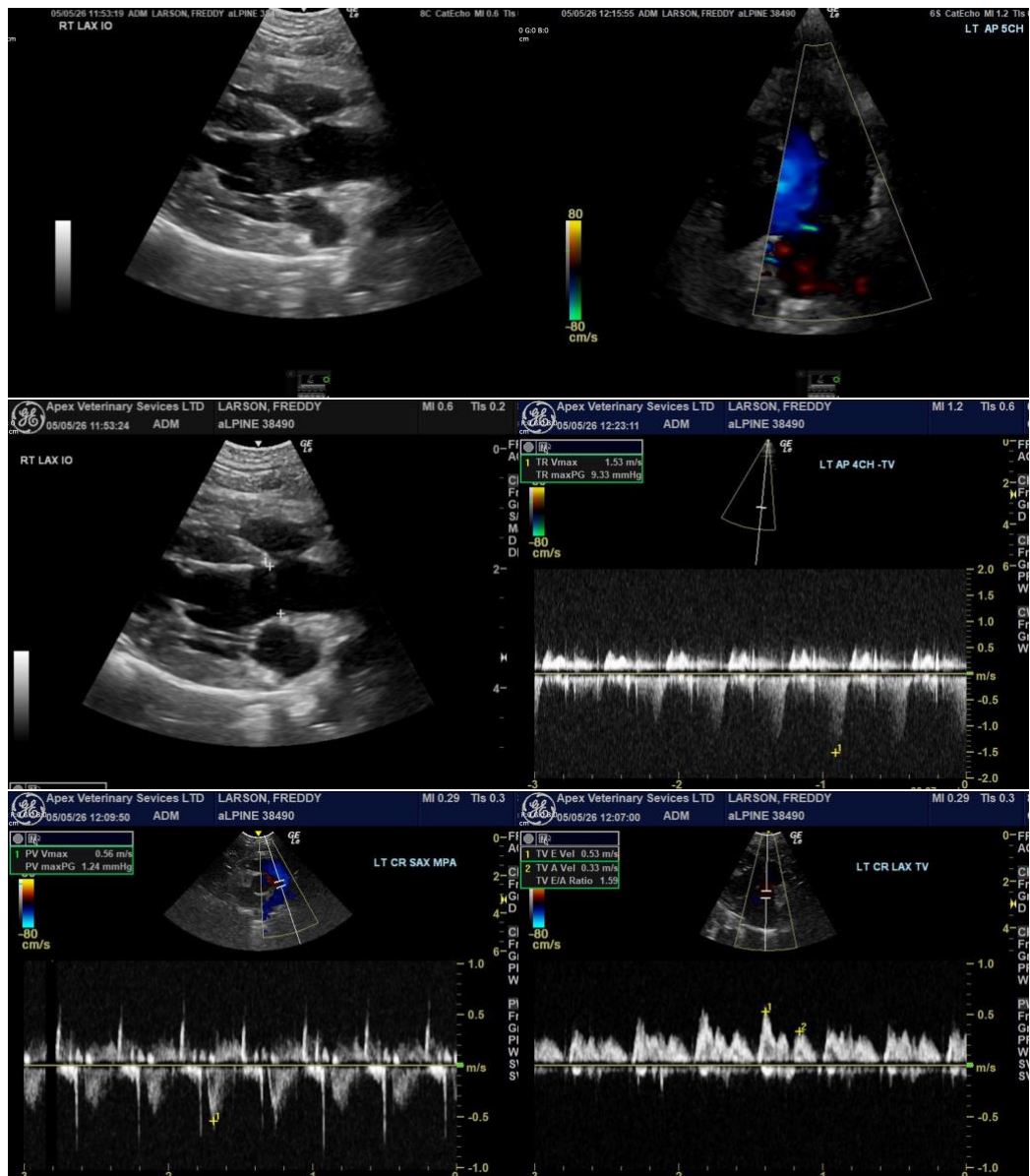
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- Normal echocardiogram with trivial mitral valve insufficiency and tricuspid insufficiency- not clinically significant.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of hemodynamically significant disease. The coughing is noncardiogenic in this patient.





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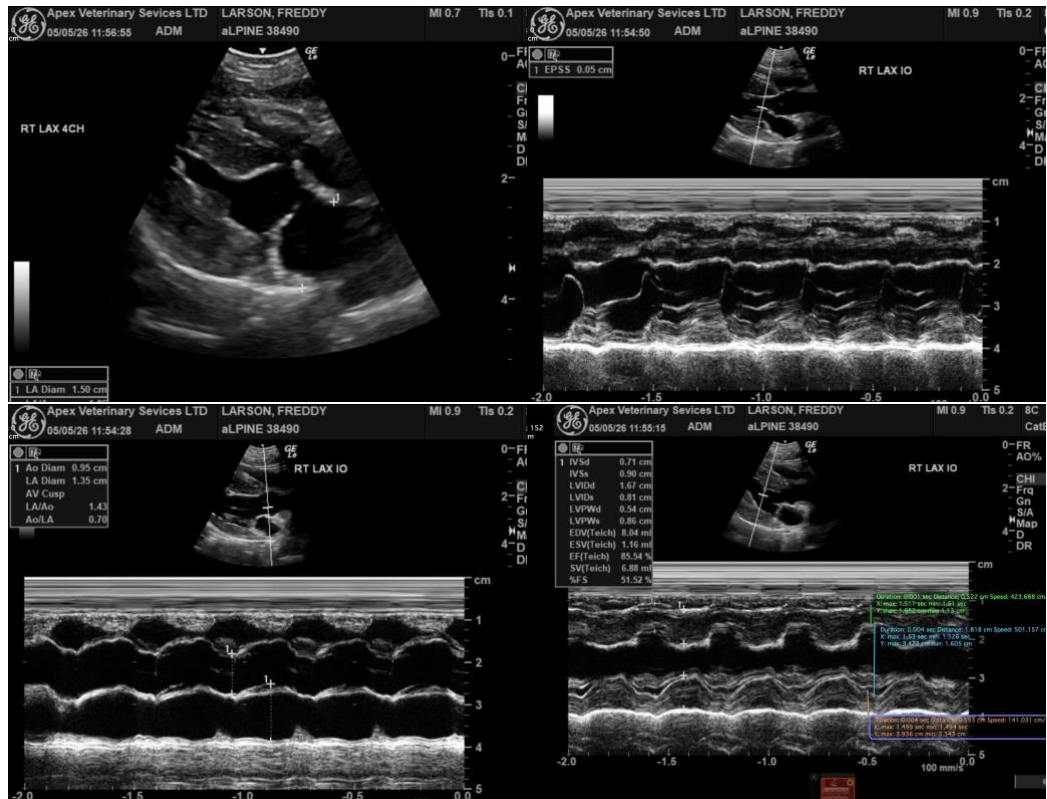
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

info@SonoPath.com