



## PATIENT PRESENTING CLINICAL SIGNS

Cleo Sforza History: re check prev u/s 6/8

## SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE HEART & ABDOMEN

Feline

BREED

DSH

SEX

Spayed Female

AGE

7 Years

WEIGHT

12 Pounds

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	0.5	1.2	0.5	45	
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	1.5	1.7	--	1.00	1.00	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

### 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 presented normal linear structure and kinetics. 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 adequate linear morphology and kinetics. 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). Trace pericardial effusion was present. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.

### Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal.

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway AH

## REFERRING VET

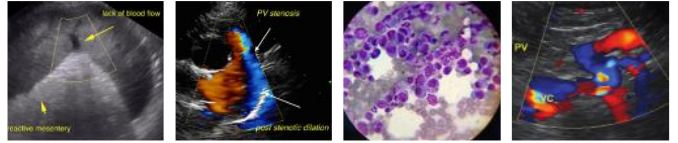
Dr. Maniar

## INVOICE

16055

## DATE

6/13/22



**PATIENT**

Cleo Sforza

The **kidneys** revealed ill-defined pericapsular fat, suggestive for inflammation. Some loss of corticomedullary definition noted. The right kidney measured 4.67 cm. The left kidney measured 4.74 cm.

**SPECIES**

Feline

**Adrenal Glands**

The regions of the **adrenal glands** revealed no evident pathology.

**Spleen**

**BREED**

DSH

**Liver**

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident. The hepatic veins were not dilated.

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**Gastrointestinal**

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

**WEIGHT**

12 Pounds

**Pancreas**

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

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**Free Abdomen**

**Pleural effusion** was noted through the diaphragm.

**IMAGING PERFORMED BY**

Jenn

**ULTRASONOGRAPHIC FINDINGS**

**HOSPITAL NAME**

Rockaway AH

- Normal cardiac structure and function
- Trace pericardial effusion
- Swollen spleen and kidneys, persistent- similar to the prior sonogram
- Pleural effusion was noted through the diaphragm

**REFERRING VET**

Dr. Maniar

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

FNA of the spleen and renal cortex recommended for further definition, as well as urine culture, if any inflammatory sediment is present. I'm concerned for a systemic inflammatory event in this patient, possibly underlying infectious or neoplasia. Enrofloxacin and clindamycin combination recommended to cover for infectious agents. Toxoplasmosis and bartonella titers indicated.

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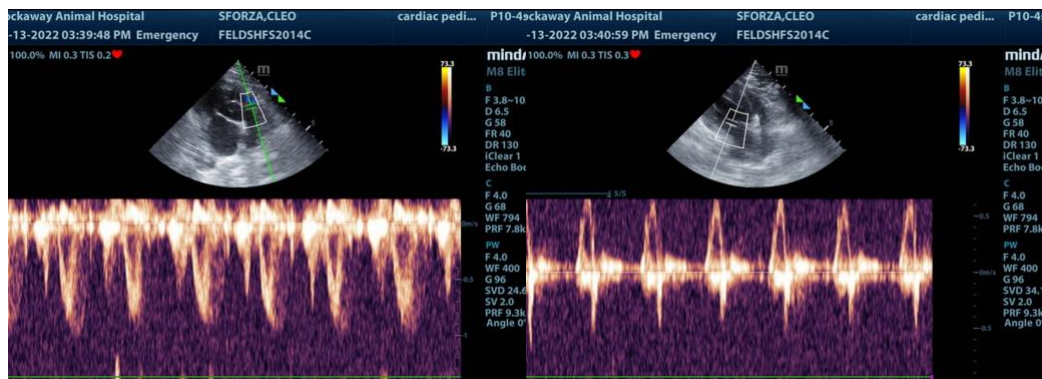
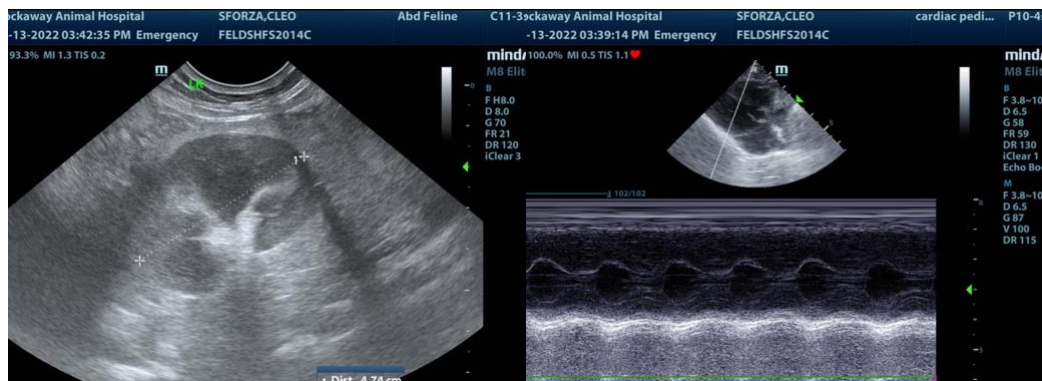
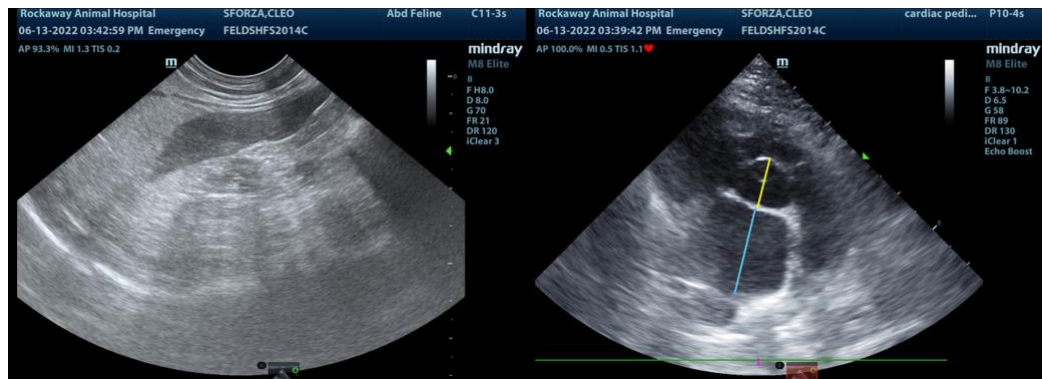
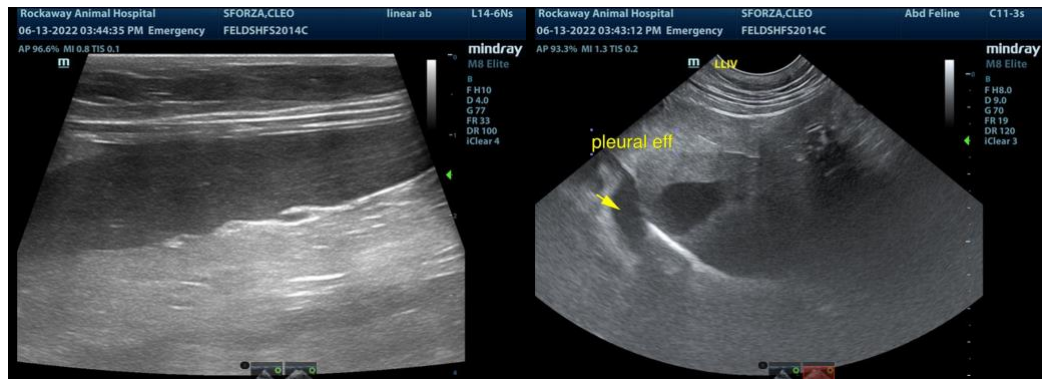
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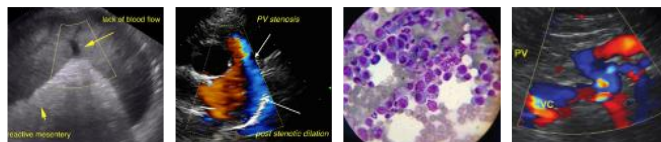
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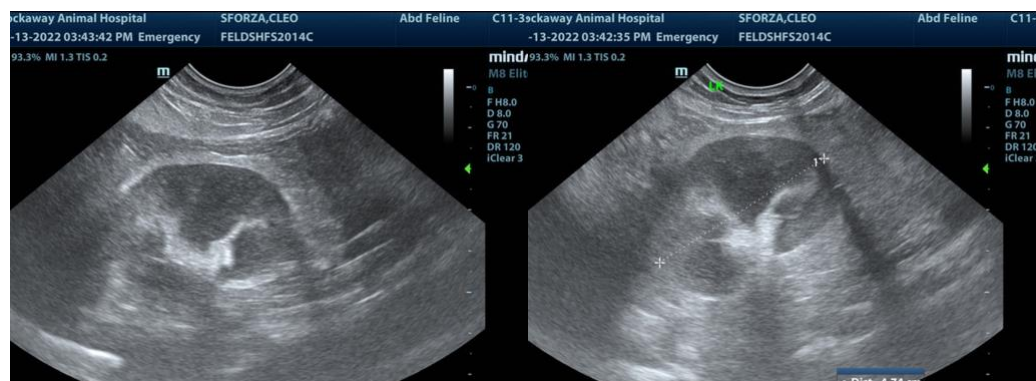
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com