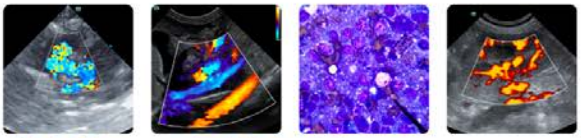

PATIENT

Cuggles Yearwood

SPECIES

Feline

BREED

Himalayan

SEX

Neutered Male

AGE

2 Years

WEIGHT

5 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Vincent Ravancho, CVT

HOSPITAL NAME

Bond Vet Montclair

REFERRING VET

Dr. Mancuso

INVOICE

75719

DATE

6/5/26

PRESENTING CLINICAL SIGNS

Echo. Historic heart murmur. Current medication - Gabapentin
Abnormal PE/Chem/CBC/UA Results: Abnormal proBNP - 497 pmol/L

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	5	NM	0.64	1.15	0.8	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	1.2	1.3	1.3		1.9	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

EPSS = 0.1

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. Minor centralized **mitral** insufficiency noted in this patient. The **left ventricle** presented myocardial remodeling with sectorial hypertrophy. 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). 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

- Myocardial remodeling and mild left ventricular hypertrophy – hypertrophic cardiomyopathy phenotype.
- Mitral insufficiency, compensated.

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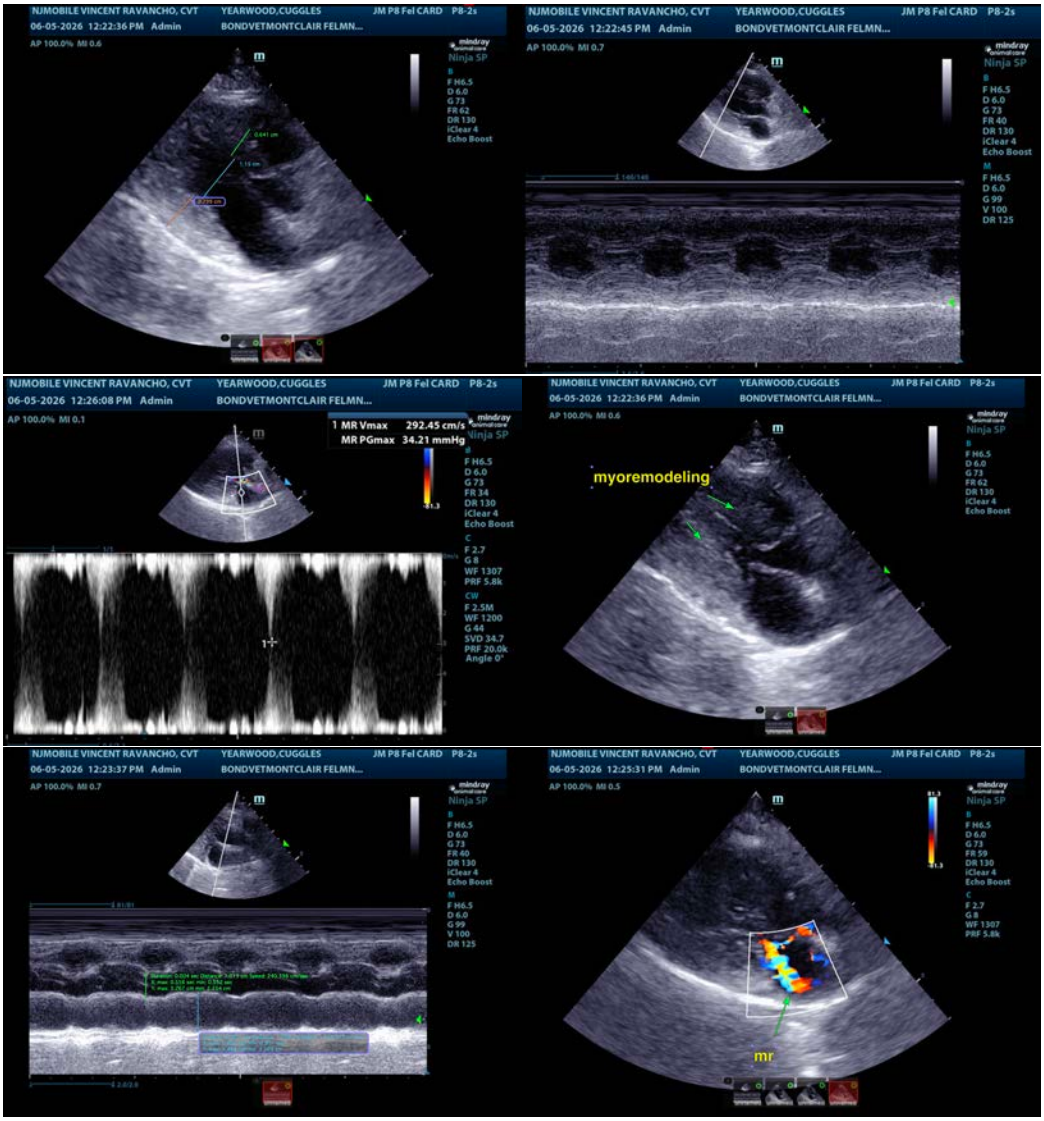
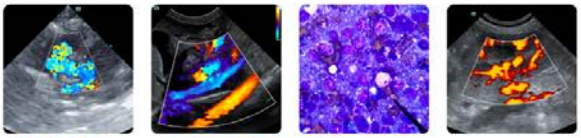
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Other causes of left ventricular thickening such as temporary myocardial thickening, hyperthyroidism, hypertension all possible, yet given the age of the patient, primary HCM likely, yet compensated at this time. No therapy recommended at this time unless resting heart rate is >200, in which case Atenolol therapy would be indicated. Recheck echo in 6 months.



New Jersey Mobile
FUELED BY SONOPATH VETERINARY ULTRASOUND



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath www.SonoPath.com info@sonopath.com 800.838.4268

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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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info@SonoPath.com