



PATIENT

Lulu Maryam

PRESENTING CLINICAL SIGNS

History: The RDVM heard heart murmur in a consultation. No clinical signs
 Abnormal PE/Chem/CBC/UA Results: Not done

SPECIES

Feline

BREED

Turkish

SEX

Spayed female

AGE

2 years

WEIGHT

4 kg

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Pasha

HOSPITAL NAME

Sonovet Dubai

REFERRING VET

Dr. Pasha

INVOICE

76087

DATE

7/11/23

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. Systolic anterior motion was noted on M mode. The **mitral** valve was thickened; however, mitral insufficiency was not significant on color flow assessment. The **left ventricular** free wall papillary was mildly excessive. No volume overload was noted. Turbulence was noted at the **left ventricular outflow** tract with excessive velocity. 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.

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	0.63	1.47	0.5	37	70
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		1.1	1.3	2.5	1.25	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

HCM phenotype, compensated with dynamic obstructive.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend Atenolol therapy in this patient at 6.25-12.5 mg s.i.d. to b.i.d. to reach a target heart rate less than 180 bpm. However, there is no consensus in its use at this time. Recheck echocardiogram in 6 months. If exercise intolerance is an issue then Atenolol is strongly recommended.



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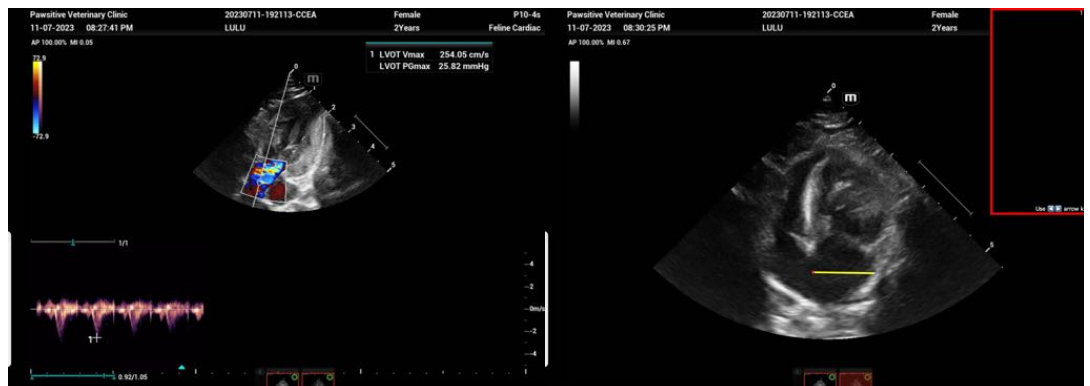
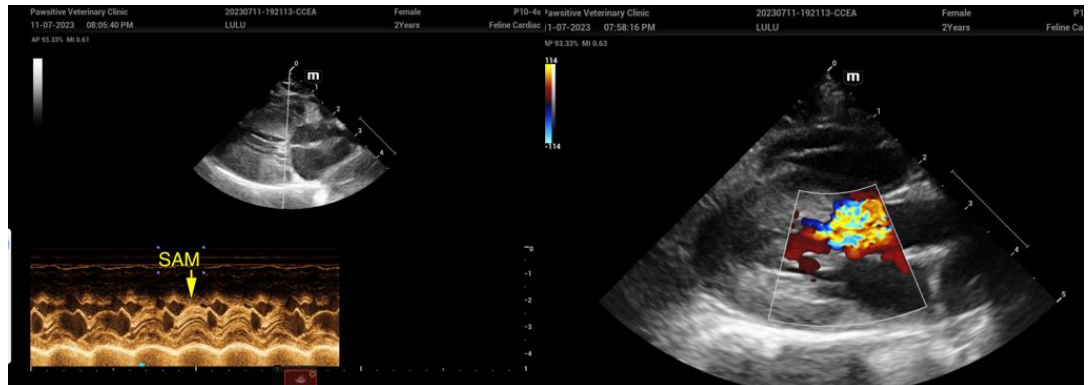
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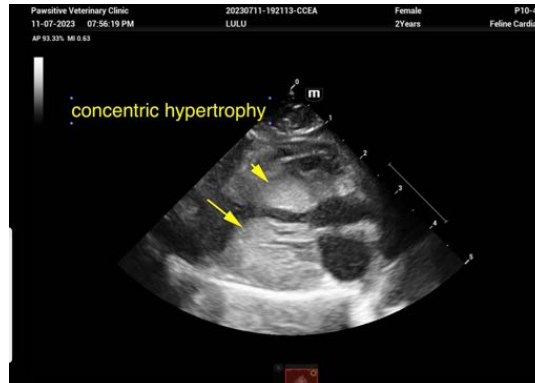
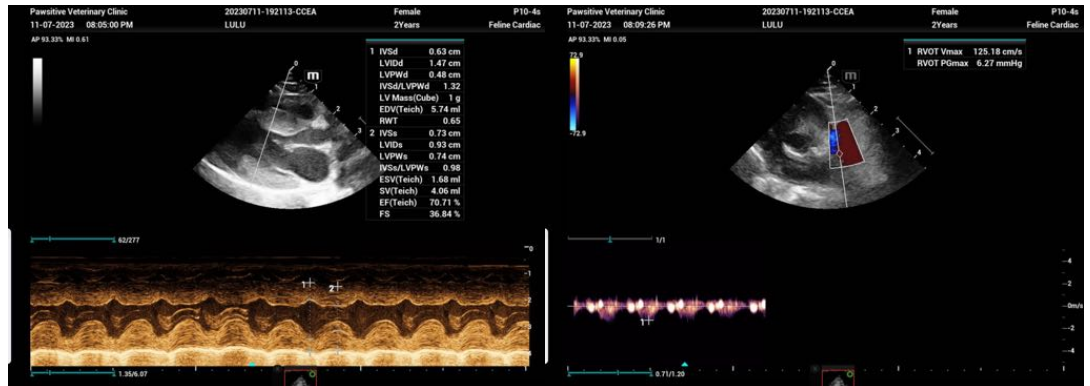
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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