

**PATIENT PRESENTING CLINICAL SIGNS**

CatLoki 53782a

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Intact Male

**AGE**

11 Weeks

**WEIGHT**

2 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

Grade 4/6 systolic heart murmur  
Abnormal PE/Chem/CBC/UA Results: Physical Exam findings Exam behavior: Fear scale: 1 No aggression noted Abnormals: Moderate generalized decreased mm mass, MCS 2/3 Grade 4/6 systolic heart murmur ASA#: 2 MM: pink CRT: less than 2 sec Attitude: QAR BCS: 4/9 Pain Scale: 0 EENT/oral: corneas clear, ears free of debris, no evidence of nasal discharge, throat palpates normally, no dental tartar, no evidence of oral masses or foreign bodies Integument: no lesions noted CVR: No arrhythmias. Strong, synchronous femoral pulses. Normal lung sounds bilaterally. See above. PLN: Lymph nodes palpate soft, symmetrical, and of a normal size. GI/GU: soft, non-painful on abdominal palpation. No organomegaly palpated. MS: ambulatory x 4. See above. P: -proBNP, +/- echo HR- 200 No BP performed

**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		NM	0.56	0.92	0.53	55	
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	1.2	1.3	1.2		1.9	2.2	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

**IMAGING PERFORMED BY**

Andrea Nicastro, DVM,  
Diplomate ACVIM  
(Small Animal Internal  
Medicine)

**HOSPITAL NAME**

Charleston Animal  
Society

**REFERRING VET**

Dr. Leigh Jameson

**INVOICE**

39357

**DATE**

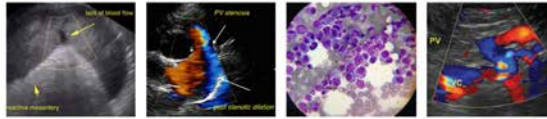
7/8/22

**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.. Eccentric left ventricular hypertrophy noted. The ventricular septum revealed a large ventricular septal defect with left to right flow measuring up to 5.0 mm/sec. Compensatory right ventricular hypertrophy with mild increased right ventricular outflow velocity noted. 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. 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.

**PRIMARY FINDINGS**

- Ventricular septal defect with right and left ventricular hypertrophy, compensated at this time
- Compensatory elevated right ventricular outflow velocity



**PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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There is a minor possibility that this defect may close. However, Hit is fairly large. The VSD measures 0.37 cm at widest point. No therapy recommended at this time. Recheck echo in 3 months. Prognosis long-term is guarded depending upon follow up.

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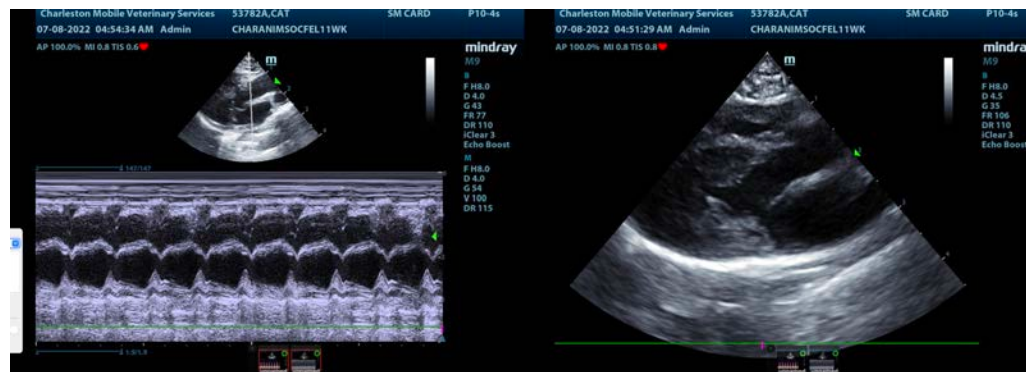
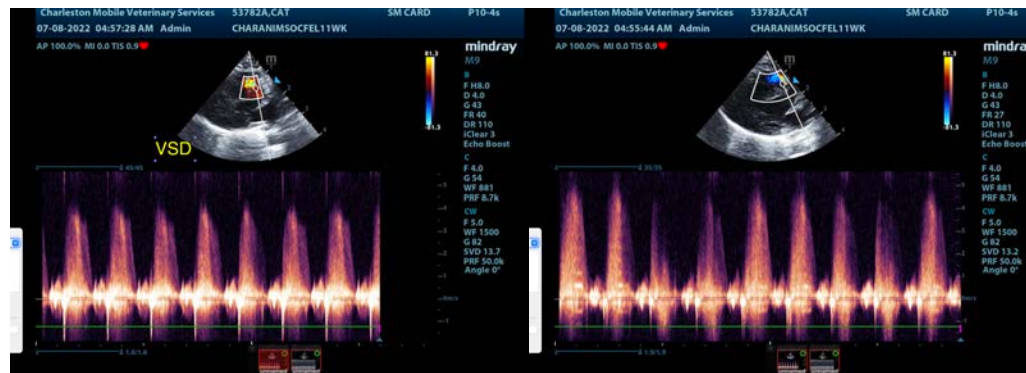
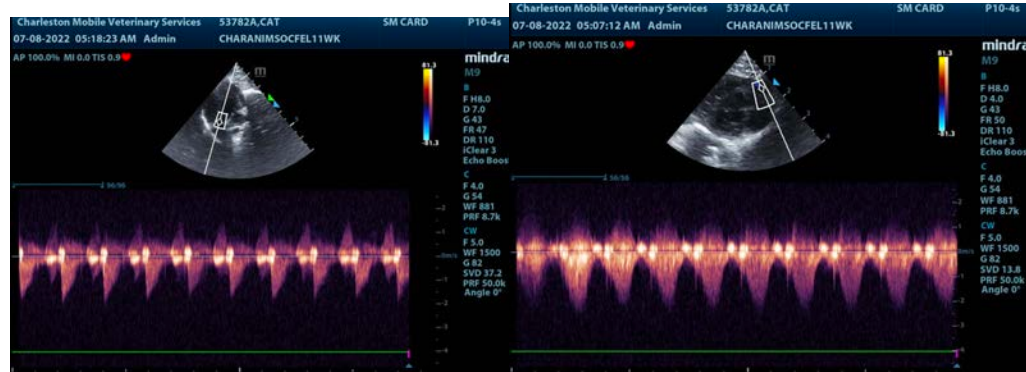
Dr. Leigh Jameson

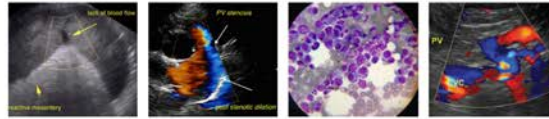
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**PATIENT**  
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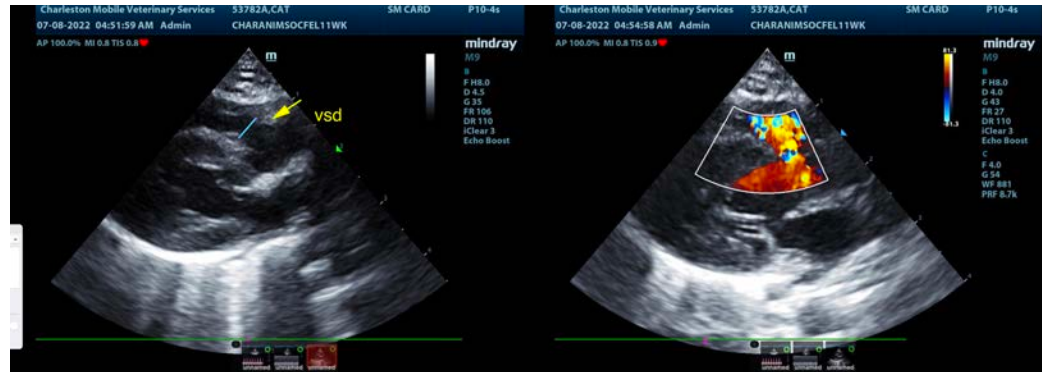
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com**

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