


**PATIENT**

Cabbage McInturf

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Spayed female

**AGE**

5 years

**WEIGHT**

13.4 lbs

**INTERPRETED BY**

 Eric Lindquist, DMV  
 DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Neis

**HOSPITAL NAME**

 Animal Health Center  
 Arkansas

**REFERRING VET**

Dr. Neis

**INVOICE**

76406

**DATE**

8/2/23

**PRESENTING CLINICAL SIGNS**

History: P was presented 7/14/23 for increased lethargy and weight gain over the past year. At the time of exam, HR was 240 bpm and heart sounds were very muffled. Resp. rate 52 rpm at rest. P appeared calm and unstressed. P is obese. No other remarkable findings on physical exam.

Abnormal PE/Chem/CBC/UA Results: CBC/chem/urine all normal with exception of elevated triglycerides (347 mg/dL) [25-160] and mild hyperglycemia (175 mg/dL). Free T4 was at the upper end of normal range at 49.9 pmol/L [10-50 pmol/L]. We only have a year of weight history on this cat, which has indicated steady weight gain (11.6 lbs this time last year)

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

The echocardiogram in this patient presented left ventricular volume overload, thinning of the septum and free wall as well as poor contractility. The left atrial size was contained at the time of the sonogram. Volume overload was evident in the left ventricle. The right ventricle and right atrium was unremarkable. Pulmonic outflow velocity was subnormal. The contractility was subnormal. Periodic tachyarrhythmia was noted in this patient. There was no pleural or pericardial effusion noted at the time of the sonogram.

FELINE CARDIAC PARAMETERS	BODY WEIGHT	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	13.4 lbs	160-280 variable	0.3	2.5	0.3	10-15	
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	1.4	1.1				0.5	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**

Dilated cardiomyopathy presentation. However, underlying myocarditis or nutritional cardiomyopathy may be playing a role in this patient.



**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

I recommend taurine supplementation and serum testing as well as Pimobendan at 0.3 mg/kg b.i.d. Ace inhibitor is recommended at 0.5 mg/kg s.i.d. EKG is indicated along with assessment for infectious agents such as Toxoplasmosis, Bartonella and regional infectious agents that can cause myocarditis. The prognosis is guarded. Recheck echocardiogram in 1-3 months or earlier if clinical decline occurs.

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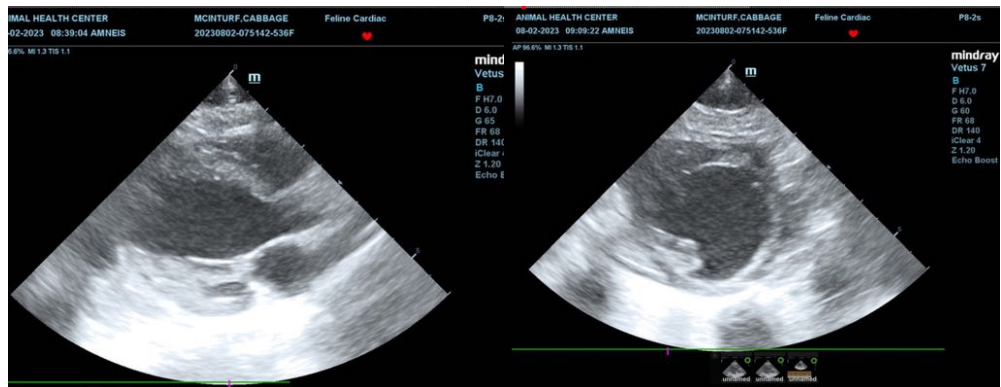
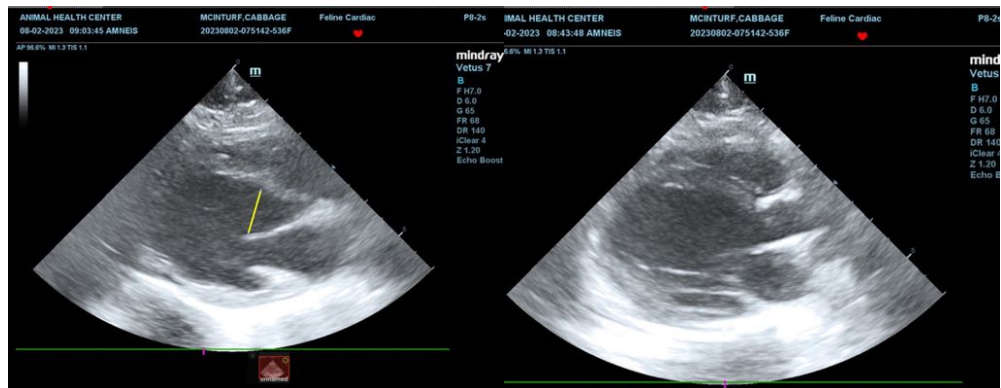
Dr. Neis

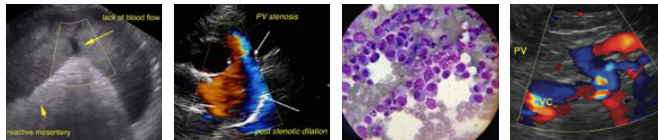
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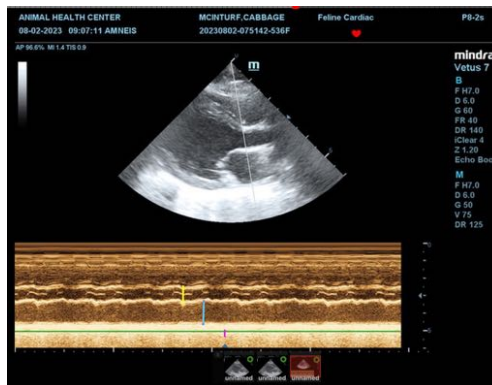
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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