



## PATIENT PRESENTING CLINICAL SIGNS

Bandit Crum Pancreatitis, limping front right leg swollen, febrile.

## SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE HEART

Feline

BREED

DSH

SEX

Neutered Male

AGE

10 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	--	2.03	0.65	0.93	0.66	56	90
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	2.03	--	--	--	.24	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). Non-cardiogenic pleural effusion noted in this patient with a large lung mass, measuring approximately 3.0 cm. Enhanced pleural changes noted. This does not appear to be a surgical presentation.

### ULTRASONOGRAPHIC FINDINGS

- Non-cardiogenic pleural effusion with lung mass, suspect carcinoma/carcinomatosis

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Cytospin of the pleural fluid with immediate slide preparation recommended for confirmation. Chest CT could be considered for further definition; however, prognosis is poor. Abdominal sonogram could

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DATE

8/27/21

INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Maniar



**PATIENT**

be considered to assess for primary disease.

Bandit Crum

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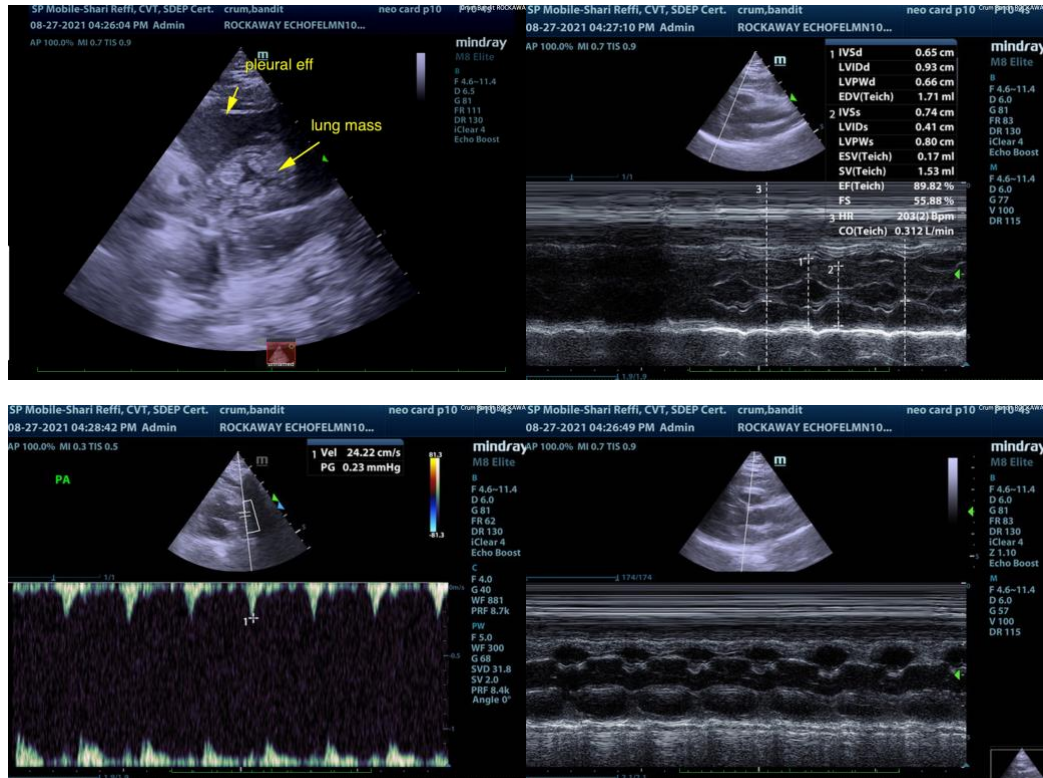
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@SonoPath.com)