



PATIENT

Lucy Leber

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

13 Years

WEIGHT

8.4 Pounds

PRESENTING CLINICAL SIGNS

Patient presented for elevated respiratory rate. Harsh lung sounds on exam and cardiomegaly with increased interstitial pattern seen on thoracic radiographs. Current meds: Potassium gluconate 2 meq BID, Pred 2.5 mgs BID.

Abnormal PE/Chem/CBC/UA Results: CBC: anemia and neutrophilia with bands.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART & ABDOMEN

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		145	0.57	1.52	0.58	32	65
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	2.1	1.9	1.9		1.0	0.73	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							

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Oakland AH

REFERRING VET

Dr. Chabora

INVOICE

41358

DATE

9/15/22

Cardiac Presentation

The cardiac presentation presented volume overload in the left heart with myocardial remodeling. Septal and free wall thicknesses were relatively normal, yet contractility was mildly subnormal. Slight pericardial effusion noted secondary to left-sided heart failure. Minor tricuspid insufficiency noted. Mitral insufficiency noted.

Urinary System

The urinary bladder, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal.

The kidneys revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.95 cm. The left kidney measured 3.52 cm.

Adrenal Glands

Both adrenal glands were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were



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unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.28 cm.

Spleen

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The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed. The spleen measured 0.63 cm.

Liver

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The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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Gastrointestinal

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Minor gastric stasis noted, unremarkable **gastrointestinal tract** otherwise.

Pancreas

WEIGHT

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The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Unclassified cardiomyopathy with left-sided failure
- Geriatric abdomen with minor gastric stasis

INTERPRETED BY

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend treatment for left-sided heart failure with off-label Pimobendan at 0.3 mg/kg BID, ACE inhibitor 0.5 mg/kg SID, Lasix at 6.25-12.5 mg BID. Target respiratory rate of <25 resp/min. Plavix therapy also indicated. Recheck echocardiogram in approximately 2-4 weeks for refinement of therapy. Recheck BUN, creatinine, blood pressures, USG, and chest radiographs as well as clinical exam in 5-10 days.

DABVP, Cert. IVUSS

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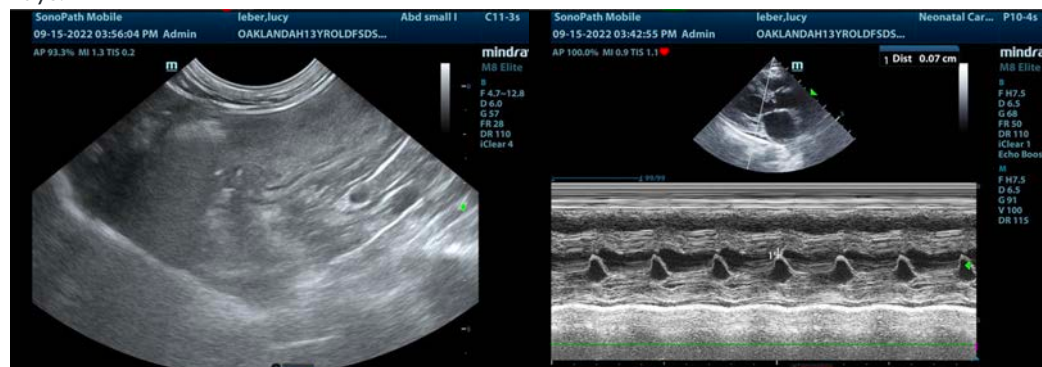
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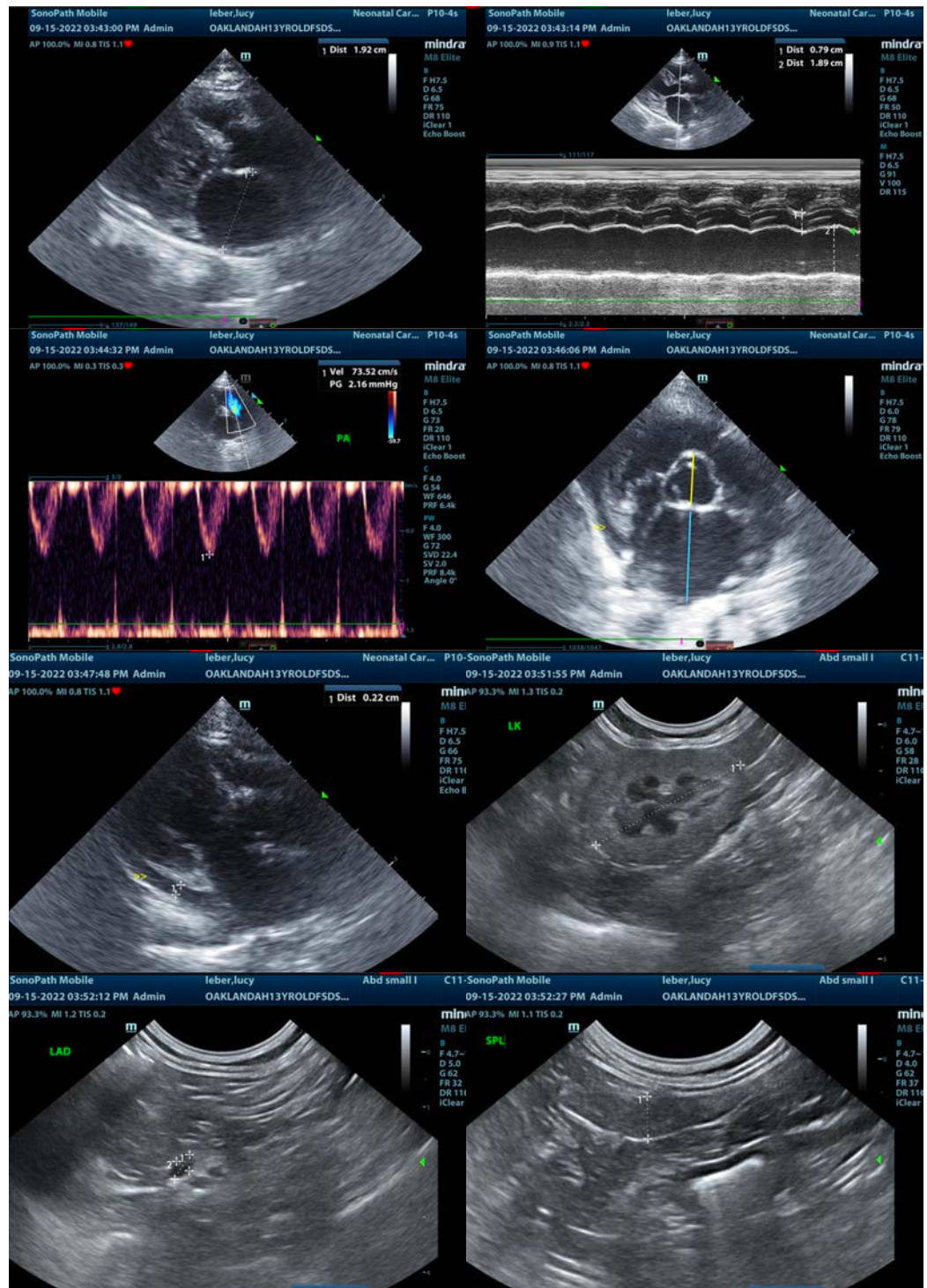
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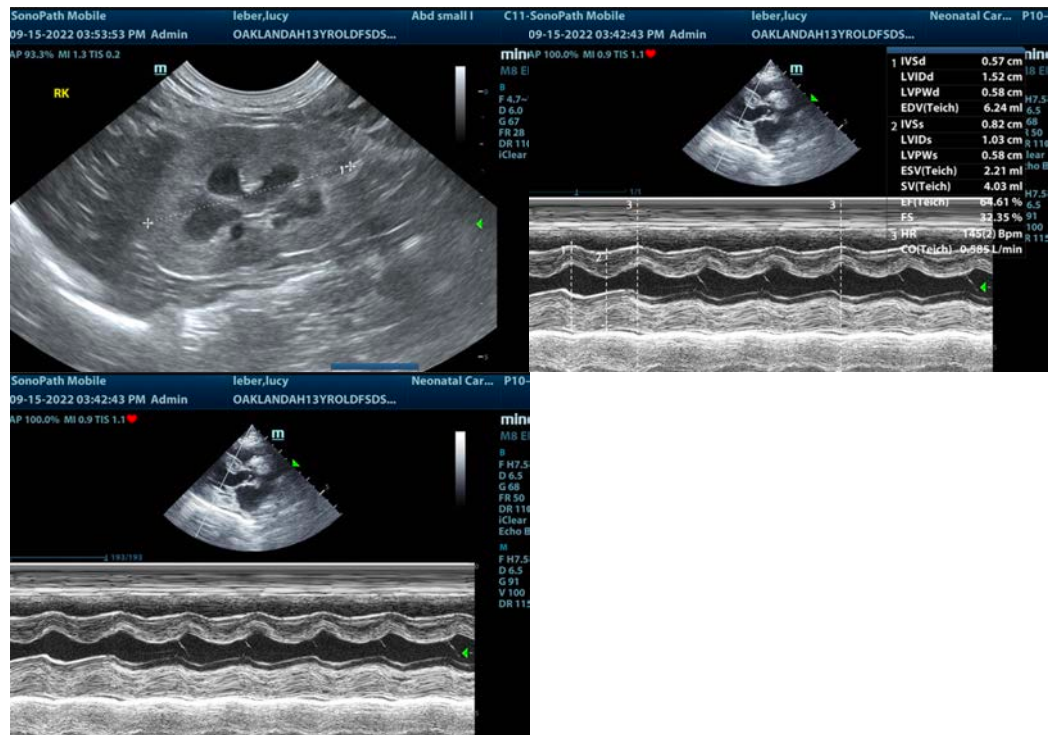
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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