



PATIENT

Nate Sullivan

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11 Years

WEIGHT

4.88 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Sova

REFERRING VET

Dr. Robert Sova

INVOICE

17133

DATE

9/2/22

PRESENTING CLINICAL SIGNS

History: Patient with history of CHF and HCM presents for recheck echo. Current meds: Lasix 12.5 mgs 3/4 tab TID, Pimobendan 1.25 mgs BID, Enalapril 1.25 mgs SID, Plavix 18.75 mgs SID, Gabapentin 50 mgs PRN.

Abnormal PE/Chem/CBC/UA Results: Blood work done at AERA: glucose 166, K 3.2.

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	0.71	1.58	0.7	45	--
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	1.8	2.0	1.83	1.67	.99	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 cardiac presentation presented moderate persistent volume overload of the left atrium, however, appears mildly improved compared to the prior sonogram. Slight pericardial effusion was noted. Sectorial hypertrophy was noted in the left ventricle with myocardial remodeling. Mitral insufficiency with moderate filling of the left atrium was noted. Hepatic veins were not dilated. Contractility was adequate. The right heart was unremarkable. Given the current medication protocol in this patient, I recommend continuation of the current protocol, if the patients basal sleeping respiratory rate is <25 p/m. Otherwise, mild increase in Lasix therapy could be considered yet given the patient history in prior sonograms, this is actually a mild improvement, other than the mild pericardial effusion, however, this is not causing tamponade and is likely secondary to chronic volume overload of the left atrium.

ULTRASONOGRAPHIC FINDINGS

- Mildly improved cardiomyopathy

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Continuation of the current protocol, if basal respiratory rate and clinical signs are stable. Recheck echo in 3-6 months or earlier if any clinical signs initiate.



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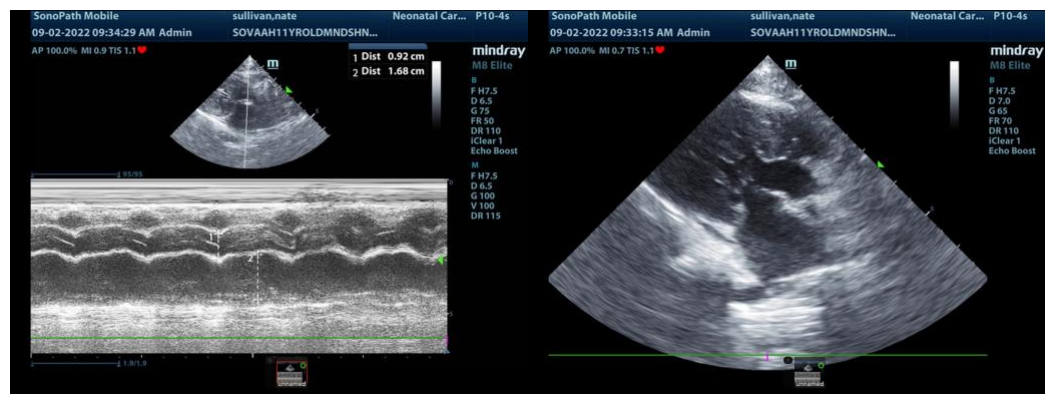
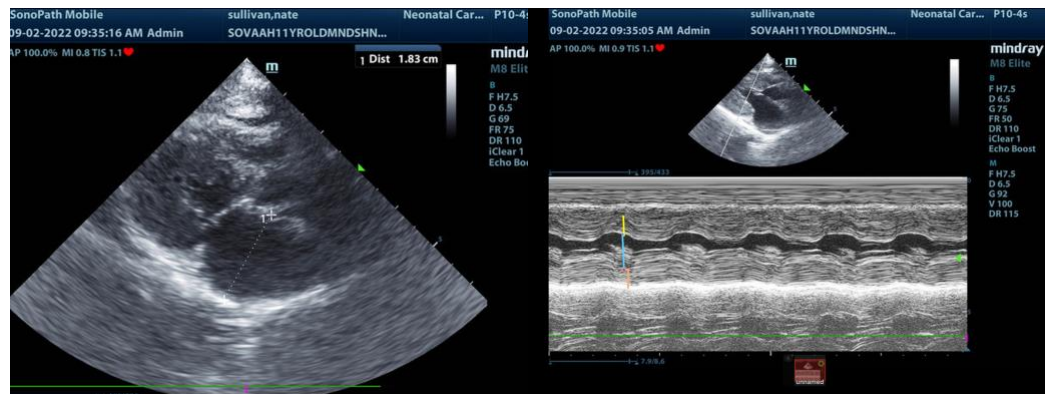
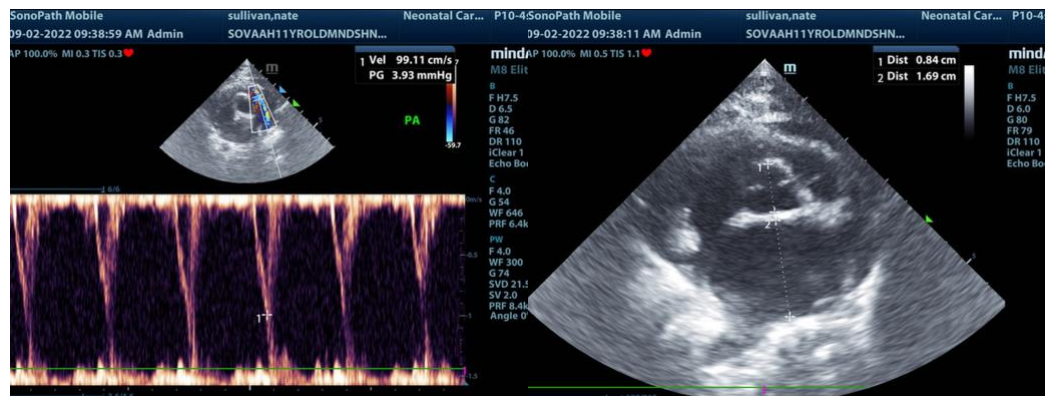
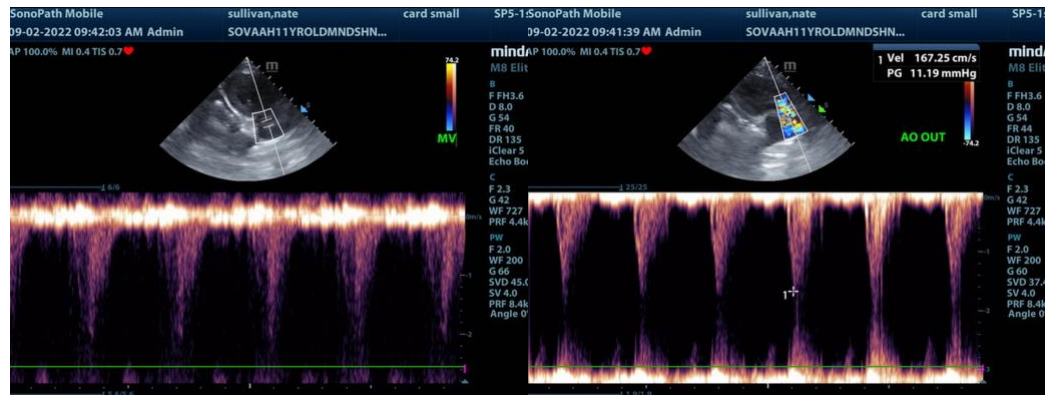
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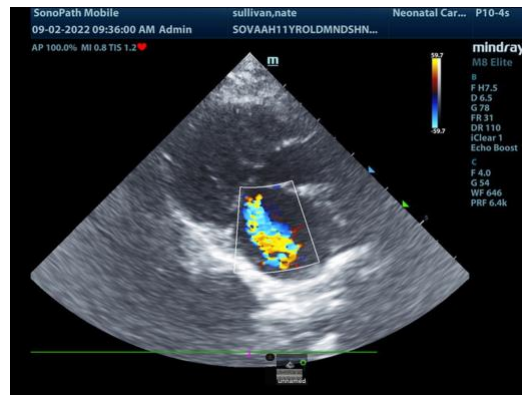
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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