



PATIENT PRESENTING CLINICAL SIGNS

Maggie Ross Patient has history of IBD, on Prednisolone long term. History of mild heart murmur for about a year. Blood tests including thyroid normal. On intake for dental noted arrhythmia. ECG shows VPCs and rads show cardiomegaly without evidence of CHF.

Feline Abnormal PE/Chem/CBC/UA Results: 12/1/2021 Albumin low normal 2.6 g/dl SDMA 15 ug/dl ProBNP normal 84 pmol/l Heart Rate and Respiratory Rates 168, 30 Blood Pressure Measurements 149/131, 112/94, 136/119 Current Medications Prednisolone 5 mg eod, Vit B12 250 mcg SQ monthly

BREED ULTRASONOGRAPHIC EXAMINATION OF THE HEART

Domestic Shorthair The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. Trivial **mitral** valve insufficiency was noted. 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. Minor **tricuspid** insufficiency was noted up to 1.6 m/sec. 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). 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. Occasional arrhythmia was noted in this patient, yet not clinically significant.

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Animal Health Associates

REFERRING VET

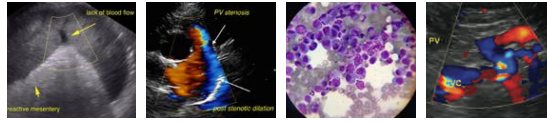
Dr. Judy

DATE

2/7/22

Invoice
95298

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	0.5	1.2	0.5	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	1.5	1.5	1.4 max	1.0	1.2	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							



PATIENT **ULTRASONOGRAPHIC FINDINGS**

Maggie Ross Structurally normal heart with mitral and tricuspid insufficiency and arrhythmogenic activity.

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

Feline

No cardiac therapy is recommended other than potential anti-arrhythmic therapy based on EKG results. Minimal effective Prednisolone dose should be utilized in this patient. Oral Prednisolone should not be an issue; however, I would avoid large doses of injectable steroids in this patient.

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

8 ½ years

WEIGHT

8.81 lbs

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HOSPITAL NAME

Animal Health
Associates

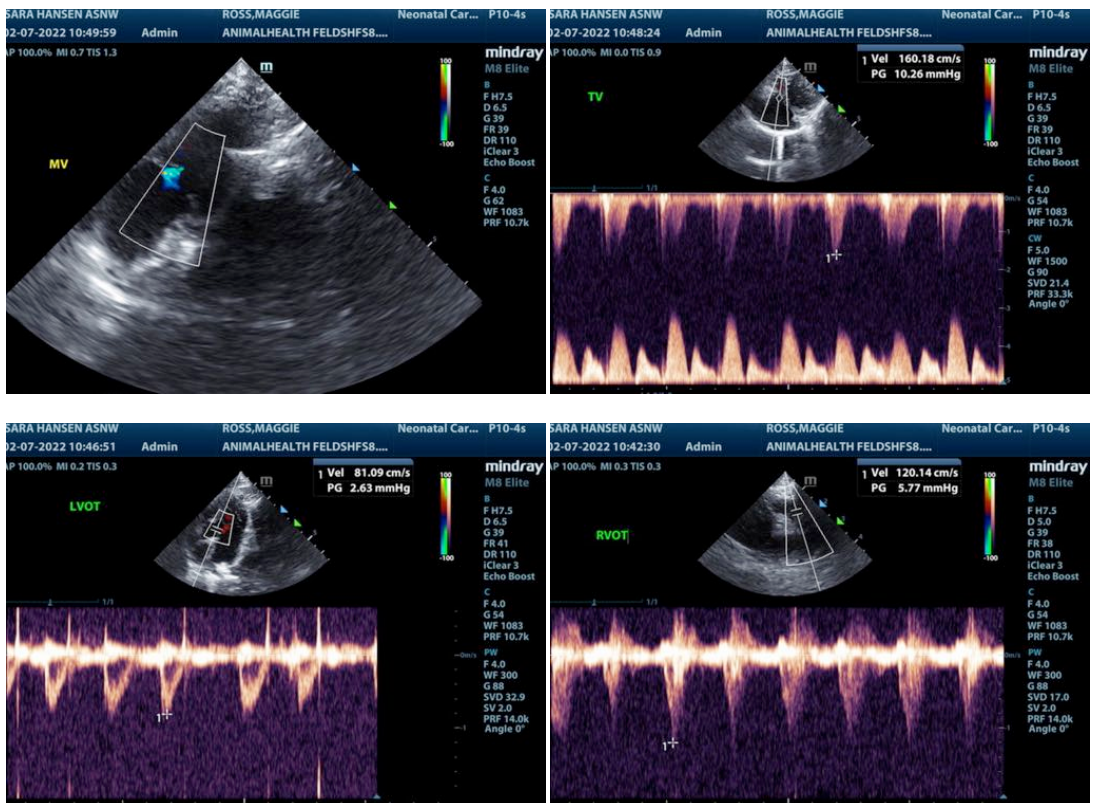
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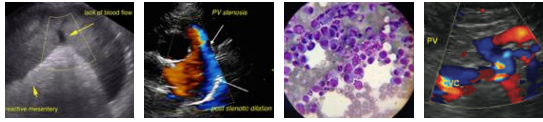
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PATIENT

Maggie Ross

SPECIES

Feline

BREED

Domestic Shorthair

SEX

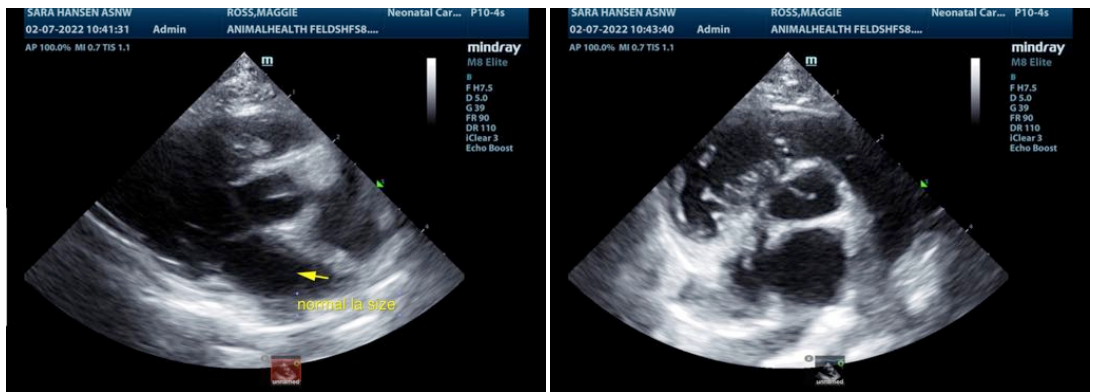
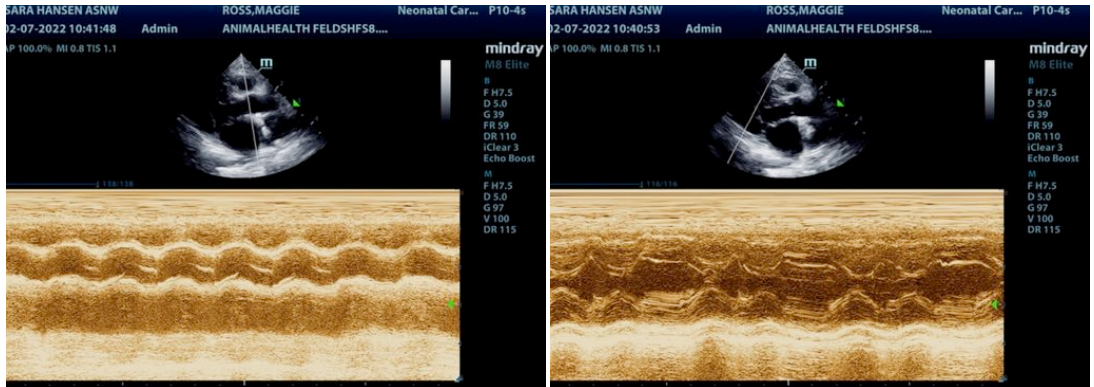
Spayed Female

AGE

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WEIGHT

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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.

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HOSPITAL NAME

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