



PATIENT

Mable Gibrall

SPECIES

Feline

BREED

DSH

SEX

Intact Female

AGE

3 Years

WEIGHT

8 Pounds

INTERPRETED BY

James Wood, DVM,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Dr. Ryan Leal

HOSPITAL NAME

Wellesley AH

REFERRING VET

Dr. Cecelia Dean

INVOICE

37064

DATE

5/11/26

PRESENTING CLINICAL SIGNS

History of mastitis requiring extensive hospitalization, surgical debridement, and tie-over bandage care – resolved. Previous litter(s). Heart murmur, normal proBNP. Unknown history prior to current owner.

Abnormal PE/Chem/CBC/UA Results: PE: Right mammary gland surgical debridement site well healed with contracted skin, palpable suture knots in SQ space but overall looks good; Grade 3/6 sternal systolic murmur, normal r/r; mild tartar on carnassials CBC/Chem/UA: pending through pDVM.

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	3.63	NM	0.48	1.4	0.37	42.8	--
FELINE CARDIAC PARAMETERS	LA/AO (M-mode)	LA/AO HEART BASE (Sisson)	LAD LA MAX 4 Chamber		LVOT VEL. (m/s)	RVOT VEL. (m/s)	IVRT (m/)
NORMAL PARAMETER	<1.5	1.6	0.7-1.7		<1.6	<1.3	40-60
PATIENT	1.5	1.46	1.05		1.12	1.0	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 mitral valve leaflets are normal and there is no mitral regurgitation. The left atrial size is normal. There is no evidence of systolic anterior motion of the mitral valve and no evidence of a left ventricular outflow tract obstruction. Left ventricular systolic and diastolic function is within normal limits. There is no evidence of left ventricular concentric hypertrophy. There is normal right atrial size without evidence of tricuspid regurgitation. There is no prolapse of the tricuspid valve leaflets and no evidence of pulmonary hypertension on the images provided. The right ventricle appears normal in structure and function subjectively. The aortic valve has normal morphology and the corresponding outflow velocities are within normal limits. There is aliasing color flow in the RVOT with a late systolic peaking CW doppler profile, consistent with a dynamic right ventricular outflow tract obstruction (benign). There is no evidence of aortic valve insufficiency. The aorta appears normal. The pulmonary artery and associated branches appear normal. There is no evidence of pleural effusion, pericardial effusion, or intracardiac masses.



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ULTRASONOGRAPHIC FINDINGS

- Dynamic right ventricular outflow tract obstruction
- Otherwise, normal echocardiogram

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The echocardiogram did not reveal any significant underlying structural or functional cardiac disease. The murmur is benign and secondary to a process called dynamic right ventricular outflow tract obstruction ("DRVOTO"). No further therapy or follow-up is needed unless additional concerns for cardiac disease arises in the future.



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.

James Wood, DVM, DACVIM (Cardiology)

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