



PATIENT

Rue Anderson

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

11 Years 8 Months

WEIGHT

11.88 Pounds

INTERPRETED BY

James Wood, DVM,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Kelly Romero

HOSPITAL NAME

Countryside AH

REFERRING VET

Catharine AH

INVOICE

37168

DATE

5/21/26

PRESENTING CLINICAL SIGNS

History: Newly heard systolic murmur on exam. Asymptomatic.

Abnormal PE/Chem/CBC/UA Results: Grade 3-4/6 systolic murmur, T4 3.1, free T4 1.4; blood pressure average 134/71.4, mean 91

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	5.4	160	0.52	1.3	0.47	46.9	--
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	1.45	1.4	1.06		0.8	0.8	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. The transmitral E and A waves are fused, but when partially separated, suggest a delayed relaxation pattern of LV filling. This is suspected to be an age-related finding in this patient. 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 and pulmonary valves have normal morphology, and the corresponding outflow velocities are within normal limits. There is no evidence of pulmonary or 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.

ULTRASONOGRAPHIC FINDINGS

- Echocardiographically normal heart
- Benign murmur



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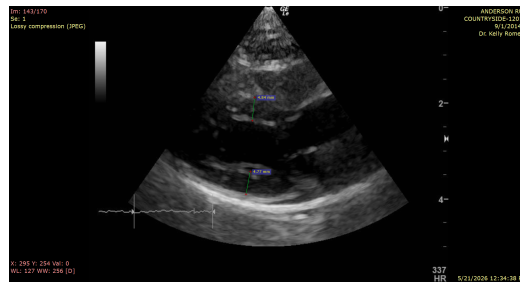
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The echocardiogram did not reveal any significant underlying structural or functional cardiac disease. A definitive cause of the murmur was not identified but is suspected to be a benign murmur such as secondary to a process called dynamic right ventricular outflow tract obstruction ("DRVOTO"), though this was not definitively documented on this echocardiogram. 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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