



## PATIENT

Siba Komarovych

## SPECIES

Feline

## BREED

Persian

## SEX

Intact Male

## AGE

9 Months 2 Weeks

## WEIGHT

3.53 kg

## INTERPRETED BY

Laurent Locquet, DVM,  
MRCVS, GPCert, (VC)  
Diplomate, ECVIM-CA  
(Cardiology)

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski, DVM

## HOSPITAL NAME

Apex VS

## REFERRING VET

Alpine 24/7 ER Doctor

## INVOICE

35671

## DATE

11/25/25

## PRESENTING CLINICAL SIGNS

History: Heart murmur detected during preanesthetic examination.

Abnormal PE/Chem/CBC/UA Results: Vital Signs: Temperature [Celsius]:38.3, Heart Rate/min (HR):188, HR: Pulse Ratio: 1:1, Respiratory Rate/ min: 28, Respiratory Effort: 0, Mucus Membranes/ CRT: pink, moist/ CRT < 2 sec, Mentation: BAR, Hydration: Adequate BP 132 /100 (107) mmHg Grade 4 /5 systolic heart murmur.

## ULTRASONOGRAPHIC EXAMINATION OF THE HEART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
<b>NORMAL PARAMETER</b>	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
<b>PATIENT</b>	3.53	NM	3.04	1.11	4.8	62	93
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/)	
<b>NORMAL PARAMETER</b>	<1.5	1.6	0.7-1.7	<1.6	<1.3	40-60	
<b>PATIENT</b>	1.49	1.20	1.04	1.07	1.52	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 echocardiogram demonstrated normal left atrial size based on three separate measurements, including LAD (left atrial diameter), and LA/Ao using both the Swedish method and the method described by Boon. The cranial and caudal mitral valve leaflets appeared normal in 2D, and color Doppler revealed no mitral valve insufficiency. The left ventricle appeared normal, with normal thickness of both the left ventricular free wall and the interventricular septum. The myocardium presented as normal, without subjective evidence of significant fibrotic or ischemic disease. Contractility of the ventricular walls was adequate and within the normal range for this patient, evidenced by fractional shortening measurements and subjective evaluation of the myocardium from multiple regions and imaging angles. The LVOT demonstrated normal structural appearance in 2D, including a normal aortic valve. Color Doppler and spectral Doppler showed non-turbulent flow with normal velocities. The right atrium and auricle revealed no abnormalities. No evidence of masses was identified. The tricuspid valve appeared normal in 2D, and color Doppler showed no tricuspid insufficiency. Subjective mild hypertrophy of the right ventricle was noted. The pulmonic tract assessment revealed no abnormalities. The pulmonic valve appeared subjectively normal in 2D; color Doppler identified no turbulent flow, and velocities were within reference ranges. No visible



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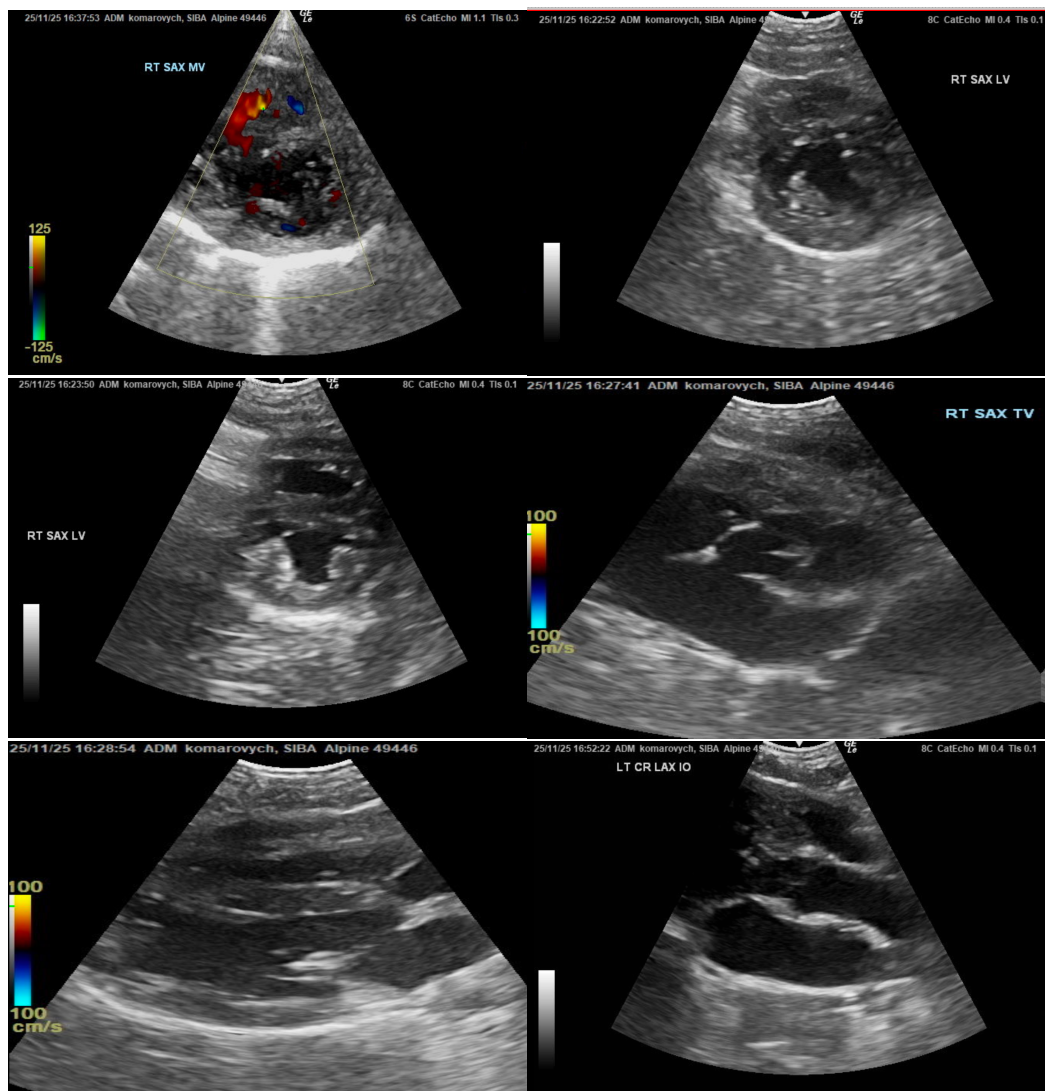
pericardial or pleural effusion was noted, and no extracardiac pathology was detected in the visible imaging planes. The cranial mediastinal and pericardial regions were free of visible masses.

## ULTRASONOGRAPHIC FINDINGS

- Subjective mild hypertrophy of the right ventricle
- Hemodynamically irrelevant heart murmur

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the age of the patient, a bubble study should be recommended before general anesthesia to exclude right to left shunts.





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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.

**Laurent Locquet, DVM MRCVS GPCert (VC) Diplomate ECVIM-CA**

[info@SonoPath.com](mailto:info@SonoPath.com)