



PATIENT

Selene Burkes

SPECIES

Feline

BREED

Persian

SEX

Spayed Female

AGE

5 Years 2 Months

WEIGHT

7 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Graham Sager-Gellerman, DVM

HOSPITAL NAME

Back Bay VC

REFERRING VET

Ariana Ferraro, DVM

INVOICE

36270

DATE

3/17/26

PRESENTING CLINICAL SIGNS

- Evaluate the following condition: 4/6 parasternal heart murmur
- Case Summary: 5 year old FS Persian cat with a heart murmur that has been present since 4/2023.
- Abnormal PE/Chem/CBC/UA Results: Senior wellness 3/11/26: proBNP 105, eosinophilia 1.99k/uL NIBP 180, 190, 210 on doppler 3/11/26 NIBP 3/17/26 (pre-sedation) avg 142 mmHg

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (lbs)	HR (BPM)	IVSd (mm)	LVIDd (cm)	LWVd (cm)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
PATIENT	7 lbs	NM	3.8 mm	0.95	0.48	59	92
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	1.20	1.20	0.93		0.91	0.77	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. Systolic anterior motion of the anterior leaflet of the mitral valve was noted, leading to mild mitral valve regurgitation. 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. Mild tricuspid regurgitation was noted. The right ventricle was normal in size (approximately one third of the left ventricular diameter) with normal chordae structure, myocardial echogenicity, and wall



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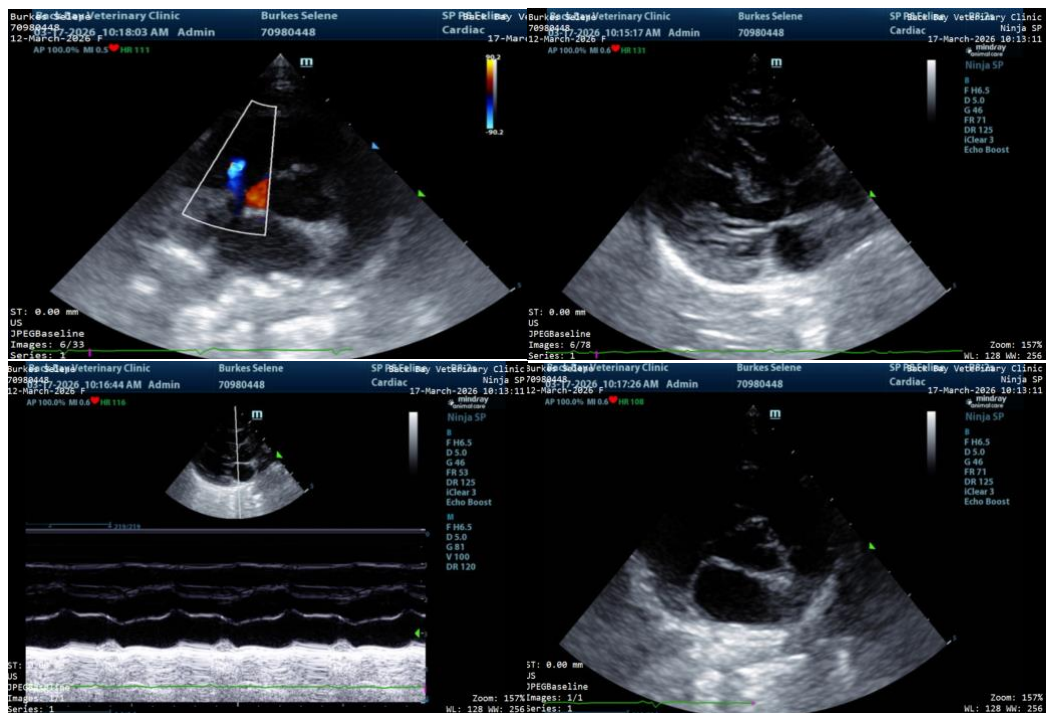
thickness. The pulmonic tract assessment revealed no abnormalities. The pulmonic valve appeared subjectively normal in 2D; color Doppler identified no turbulent flow, and velocities were within reference ranges. No visible pericardial or pleural effusion was noted, and no extracardiac pathology was detected in the visible imaging planes. The cranial mediastinal and pericardial regions were free of visible masses.

ULTRASONOGRAPHIC FINDINGS

- Mild tricuspid valve regurgitation
- Systolic anterior motion of the mitral valve
- Normal echocardiogram otherwise

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No medications are necessary. Recheck is recommended in one year.





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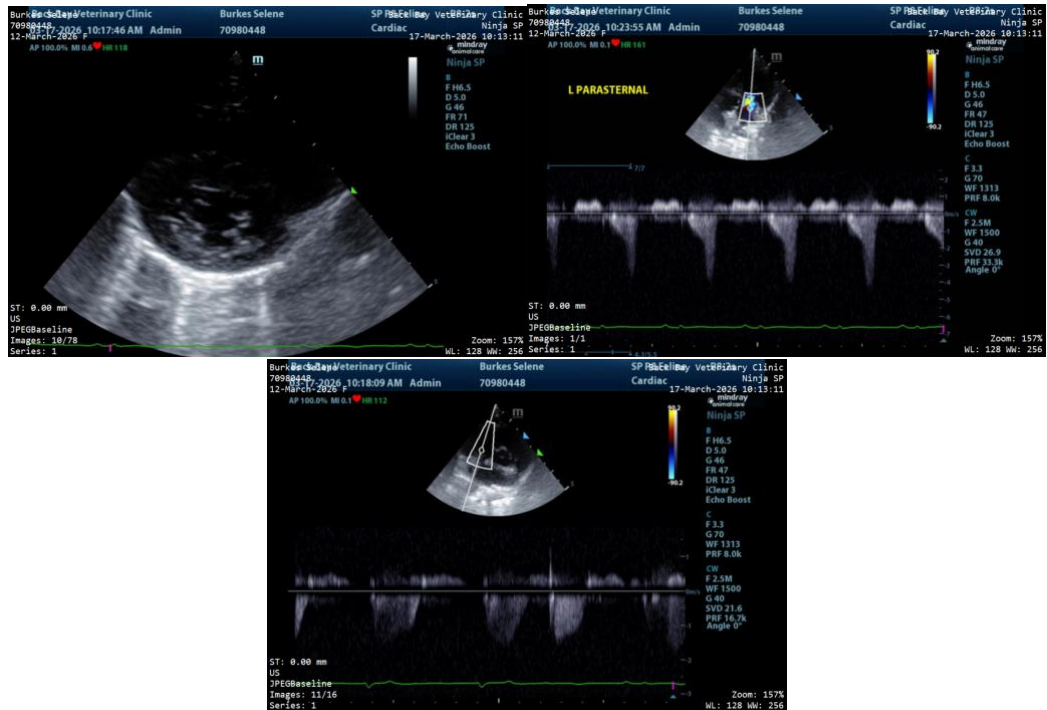
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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