

**PATIENT**

Luke Goodking

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

10 Years

**WEIGHT**

13.5 pounds

**PRESENTING CLINICAL SIGNS**

New grade II/VI parasternal murmur

Abnormal PE/Chem/CBC/UA Results: CK 1049, Neuts 2343, USG 1.055

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

FELINE CARDIAC PARAMETERS	BODY WEIGHT (lbs)	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	13.5	NM	0.48	1.32	0.48	69	95
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	1.34	1.12	10.95 mm	1.09	1.12	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							

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Meghan Morse LVT,  
 CVT

**HOSPITAL NAME**

Kingston Animal  
 Hospital

**REFERRING VET**

Dr. Turner

**INVOICE**

15348

**DATE**

04/22/26

**Cardiac Presentation**

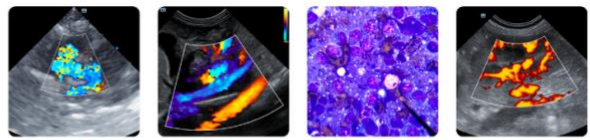
The left atrium was normal in all 3 views. The mitral valve was normal. The left ventricle was normal. The myocardium was normal. Contractility was normal. Left ventricular outflow tract was normal. The right atrium was normal. No evidence of masses. The tricuspid valve was normal. The right ventricle was normal. The pulmonic tract was normal. No visible pericardial effusion or pleural effusion. The cranial mediastinum and pericardial regions were free of masses in the visible windows.

**ULTRASONOGRAPHIC FINDINGS**

- Possible idiopathic flow murmur- not hemodynamically relevant.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No medication is necessary. A recheck is not necessary unless there are any concerns.



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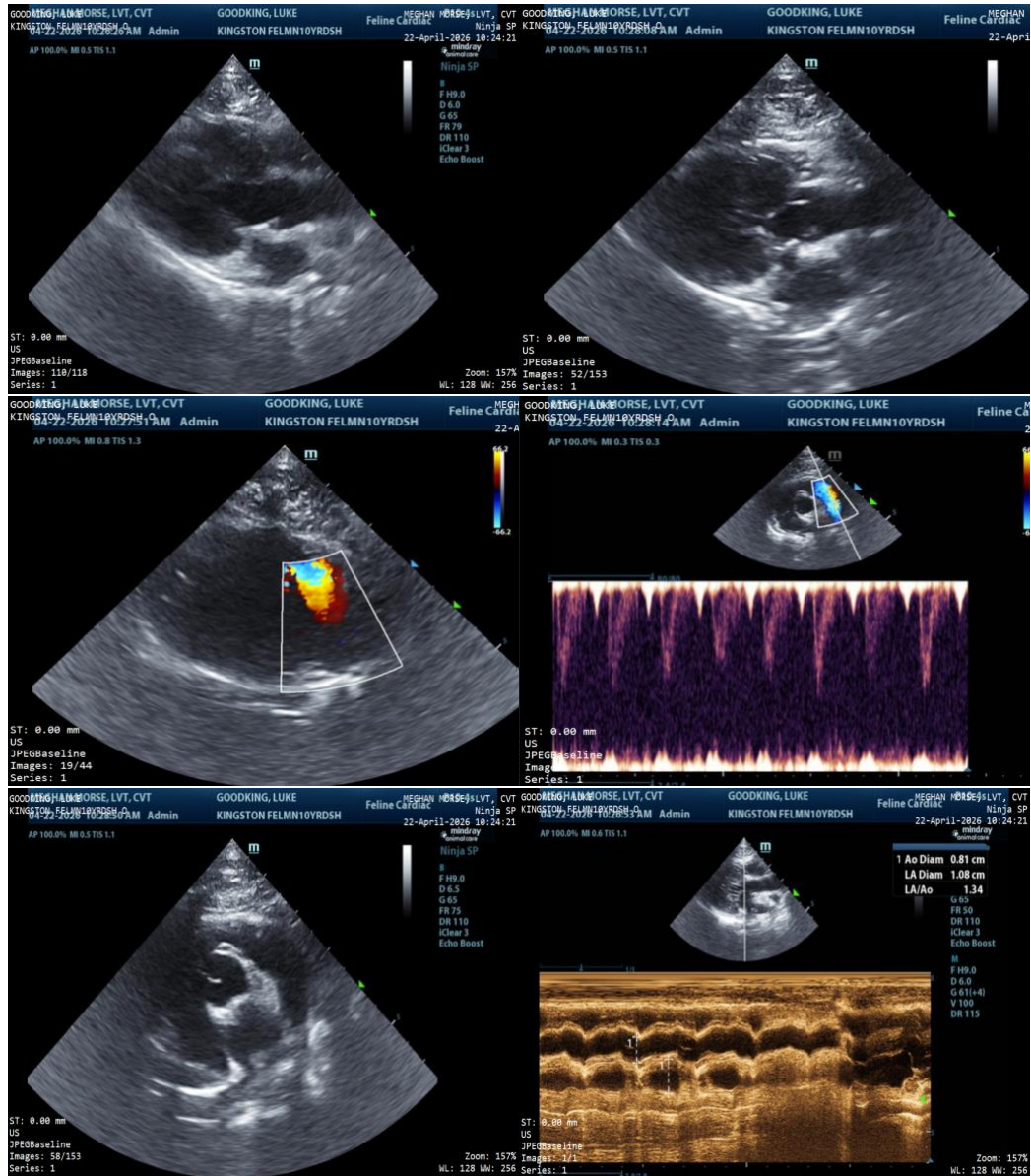
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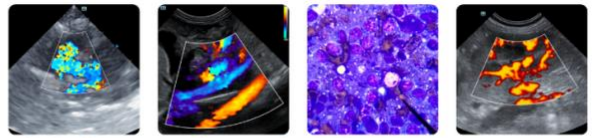


The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 (Cardiology)

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



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