



## PATIENT

Tux Sanchez & Mendoza

## SPECIES

Feline

## BREED

DSH

## SEX

Male Neutered

## AGE

4Y

## WEIGHT

8.9

## INTERPRETED BY

Dr. Leticia Utsch MV

## IMAGING PERFORMED BY

Jennifer & Jessica

## HOSPITAL NAME

Northvale Veterinary Clinic

## REFERRING VET

Dr. Stefanie Simon

## INVOICE

75560

## DATE

6-17-26

## PRESENTING CLINICAL SIGNS

Diagnosed with HCM in April 20256, current on plavix 18.75 mg SID, doing well at home but turns cyanotic when stressed at vet's office. Concerned about pulmonary edema; auscultation shows muffling of heart.

Radiographs (4/20/26) and echocardiogram (4/8/26) done by Sonopath.

## RADIOGRAPHIC STUDY OF THE THORAX

Radiographs of the thorax in three imaging planes are provided for review.

## RADIOGRAPHIC FINDINGS

### Thorax

The heart is severely enlarged. In the lateral views, it displaces the trachea in the bifurcation region dorsally. In the ventrodorsal view, it has "valentine's heart" shape.

The lungs are normally insufflated and transparent.

The trachea and principal bronchi have a normal diameter.

The mediastinum and pleural space also appear normal. In the left lateral view, soft tissue/ fluid opacity superimposes with the heart, likely representing superimposition of cardiac structures and pericardial/ mediastinal fat.

Bone structures do not show any significant changes.

## RADIOGRAPHIC DIAGNOSIS

- Enlarged cardiac silhouette. Compatible with previously diagnosed HCM;
- There is no evidence of pulmonary edema in the current study.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Cardiomegaly is present and remains consistent with the previously diagnosed HCM (likely ACVIM stage B2). No radiographic evidence of congestive heart failure is identified at this time. While HCM may be related to the reported cyanosis, as it can contribute to reduced cardiac output during stress, additional factors such as arrhythmia, dynamic cardiac outflow obstruction, or concurrent upper airway disease should be considered. Correlation with the previous echocardiographic findings is recommended. Continued cardiac monitoring is advised. Prompt re-evaluation is recommended if tachypnea, increased respiratory effort, lethargy, weakness, or other signs suggestive of congestive heart failure develop.



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The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

**Dr. Leticia Utsch MV**

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