



**PATIENT**

Popeye Latorre

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

12y 6m

**WEIGHT**

14.7 lbs.

**INTERPRETED BY**

R. McKenzie Daniel,  
 DVM, DABVP  
 (Canine and Feline)

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Barton Heights AH

**REFERRING VET**

Dr. Duffield

**INVOICE**

10550

**DATE**

1/15/26

**PRESENTING CLINICAL SIGNS**

BCS 7 Grade IV/VI systolic murmur, possible syncopal episode.

Overweight, murmur, h/o asthma, FIV+

**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	14.7	NM	0.64	1.45	0.63	45	78
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	-	1.2	1.3	1.47	0.8	-	

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 in this patient demonstrated normal **left atrial** size and structure. Chamber volume and blood echogenicity were normal, no LA spontaneous contrast. The cranial and caudal **mitral** valve leaflets presented minor irregular age-related changes that are not clinically significant at this time with adequate extension in systole and union in diastole. No obvious significant MR on Doppler. The **left ventricle** presented Mild increased free wall and septal thicknesses with mild alinear contour. The **myocardium** presented some echogenic remodeling consistent with expected age-related change. **Contractility** of the ventricular walls was adequate and in normal range for this breed and patient size. The **left ventricular outflow** tract demonstrated normal to mild dynamic flow with subjectively unremarkable structure. Normal measured LVOT velocity was noted. Subjective assessment of the **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated expected findings for this age patient. The **right ventricle** was of normal size (1/3 diameter of LV), echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter (approx.1:1 pa/ao ratio). Normal measured RVOT velocity was noted. No visible **pericardial** or free pleural fluid was noted. The **mediastinum** was free of masses in the visible window.

**ULTRASONOGRAPHIC FINDINGS**

- Mild thickened remodeled LV, adequate LV systolic function
- Normal LA
- Normal RA / RV



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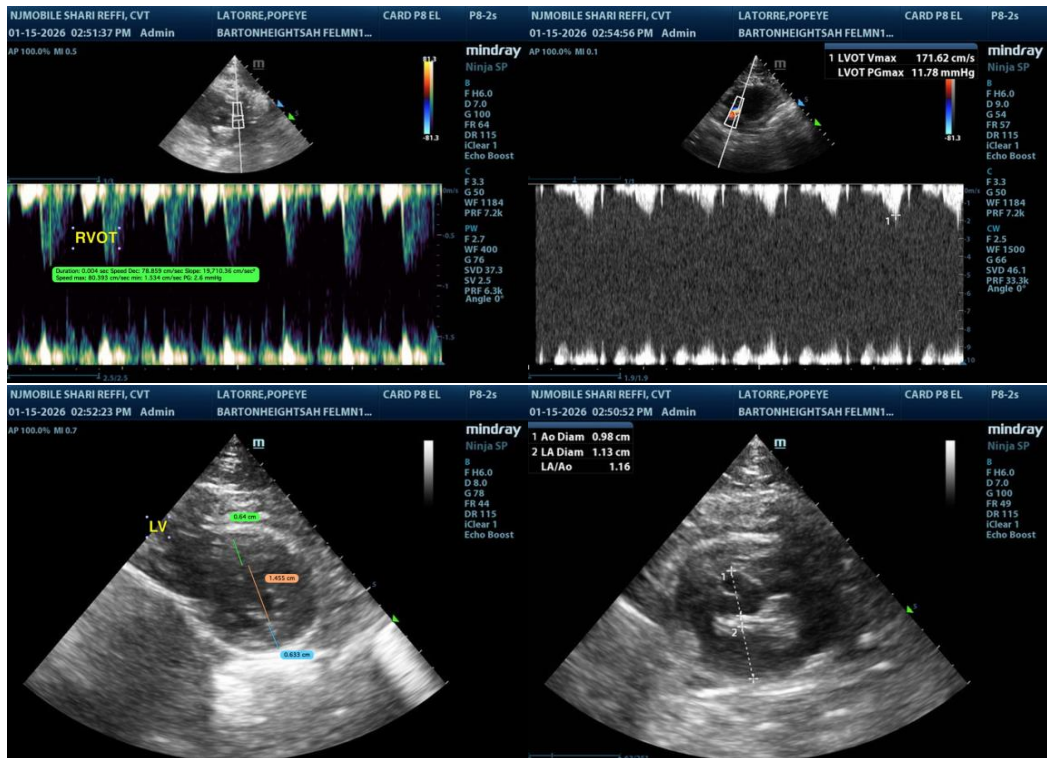
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mildly thickened LV dimension suggests HCM phenotype, which would be a rule-out diagnosis once the patient is deemed euthyroid and normotensive. A definitive cause of the murmur was not obvious. A significant yet benign flow murmur or non-visualized flow abnormality is possible. Regardless of cardiac or murmur classification, the lack of cardiac chamber enlargement indicates that the current and future risk of complications is low. There is no obvious indication for cardiac medications. Assessment of systemic BP and T4 levels is suggested if not recently done. Conservative monitoring of the murmur going forward is advised. A recheck echocardiogram is suggested in 6 months, sooner if clinical signs arise or if murmur intensity increases.



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.

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