



PATIENT PRESENTING CLINICAL SIGNS

Eleanor Sanderson

History: Radiologist recommended to rule out any underlying cardiac disease. Currently on Depo Medrol and Dexamethasone IM.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Increased Eosinophils, decreased monocytes, increased BUN and Creatinine, Increased glucose, decreased Na.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED

DSH

SEX

Spayed Female

AGE

12 Years

WEIGHT

8.6 Lbs.

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	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	--	211	0.41	1.37	0.41	47.4	82.4
FELINE CARDIAC PARAMETERS	LA/AO (Boon)	LA/AO HEART BASE (Sisson)	LA 2D 4-chamber long axis AS to FW (Sisson) (cm)	LVOT VEL. (m/s)	RVOT VEL. (m/s)	IVRT (m/)	
NORMAL PARAMETER	<1.5	0.88-1.79	0.7-1.7	<1.6	<1.3	40-60	
PATIENT	1.2	1.22	1.32	1.1	0.92	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

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

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. The cranial and caudal **mitral** valve leaflets presented normal linear structure and kinetics. The **left ventricle** presented normal thicknesses with primarily maintained linear contour and was not dilated nor restricted. The **myocardium** presented normal echogenicity without evidence of significant fibrotic or ischemic disease yet with evidence of mild myocardial remodeling, likely associated with age. **Contractility** of the ventricular walls was adequate and in normal range for this patient evidenced by the fractional shortening measurement and subjective evaluation of the different regions and angles of the myocardium. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinetics. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter (approx.1:1 pa/ao ratio). No visible **pericardial** or free pleura fluid was noted or extra cardiac pathology in the visible planes. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.

IMAGING PERFORMED BY

Crystall Hill

HOSPITAL NAME

St. Catharine's AH

REFERRING VET

Dr. Masoud

INVOICE

13544

DATE

1/21/22

ULTRASONOGRAPHIC FINDINGS

- Overtly normal cardiac structure and function with minor LV and myocardial remodeling

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



PATIENT

Eleanor Sanderson

No evidence of structural or functional cardiomyopathy. No evidence of left or right heart chamber enlargement suggestive of impending CHF. No indication for cardiac medications. Recheck echocardiogram suggested in 6 months to assess for evidence of progressive myocardial remodeling, sooner if clinical signs suggestive of cardiac disease arise.

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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.

IMAGING PERFORMED BY

Crystall Hill

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.

HOSPITAL NAME

St. Catharine's AH

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