



PATIENT

Pixie Mason

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years

WEIGHT

12.3 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP (Canine
/ Feline Practice)

IMAGING PERFORMED BY

Meghan Morse LVT,
CVT

HOSPITAL NAME

All Animal Veterinary
Services

REFERRING VET

Dr. Acworth

INVOICE

13285

DATE

01/21/26

PRESENTING CLINICAL SIGNS

- Hx of grade 3-4 heart murmur

Abnormal PE/Chem/CBC/UA Results: SDMA 16, Eos 1.83, proBNP 139.6 U/A: wbc and rbc present, USG 1.025

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	12.3	NM	0.52	1.5	0.52	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	--	1.37	1.4		1.1	1.0	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 left ventricular wall exhibited normal dimension with regions of mild irregularity. There is a diffuse mildly hyperechoic endocardium consistent with fibrosis and ventricular remodeling. Mildly prominent remodeled papillary muscles. Normal left atrial dimension, no spontaneous contrast. Suspect indistinct systolic anterior motion (SAM) of the mitral valve present, with a normal measured LVOT velocity seen on color flow. Mild dynamic LVOT profile. There is mild eccentric mitral regurgitation present on doppler. Normal right atrial size. Normal right ventricle size. Normal RVOT velocity. No TR. No other obvious valvular regurgitation is present. There is no pericardial effusion noted. No pleural effusion appreciated. No obvious cardiac tumors.

ULTRASONOGRAPHIC FINDINGS

- Normal LV dimension with myocardial remodeling.
- Normal LA.
- Eccentric MR with suspect indistinct systolic anterior motion in the mitral valve.
- Normal RA/RV.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cause of the murmur is most consistent with mitral valve insufficiency, suspected to be secondary



PATIENT

Pixie Mason

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years

WEIGHT

12.3 pounds

INTERPRETED BY

R. McKenzie Daniel,
 DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Meghan Morse LVT,
 CVT

HOSPITAL NAME

All Animal Veterinary
 Services

REFERRING VET

Dr. Acworth

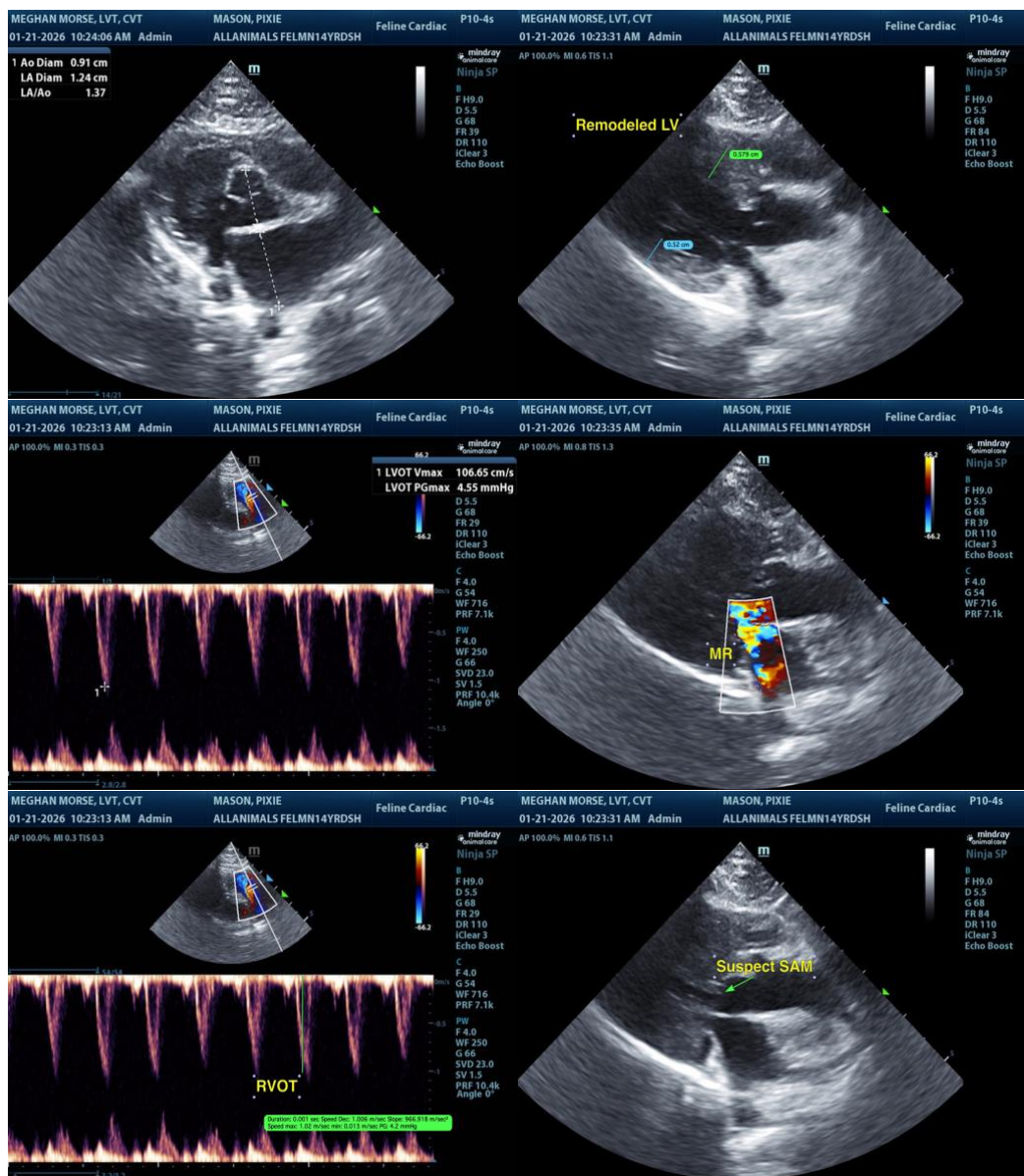
INVOICE

13285

DATE

01/21/26

to indistinct SAM. This suggests concurrent mild low-grade dynamic LV outflow obstruction and mild hypertrophic obstructive cardiomyopathy without current evidence of increased LV wall dimension. Regardless of classification, the hemodynamic effects of the murmur at this stage are low. No indication for cardiac medication. Conservative monitoring of the murmur going forward is advised with sonographic reassessment for evidence of progression in six months or sooner if increase in murmur intensity or if clinical signs arise. Current cardiac anesthetic risk is considered mild. Assessment of T4 level and systemic BP if not recently done is suggested. Suggested anesthetic protocol may include opioid or Benzodiazepine pre-med, induction with Propofol or Alfaxalone, and appropriate gas anesthesia with avoidance of alpha 2 agonists.



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



PATIENT

Pixie Mason

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years

WEIGHT

12.3 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP (Canine
/ Feline Practice)

**IMAGING
PERFORMED BY**

Meghan Morse LVT,
CVT

HOSPITAL NAME

All Animal Veterinary
Services

REFERRING VET

Dr. Acworth

INVOICE

13285

DATE

01/21/26

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com