



## PATIENT

Misha Maklakova

## SPECIES

Feline

## BREED

Sphynx

## SEX

FS

## AGE

10 yrs

## WEIGHT

9.8 lbs.

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Shari Reffi CVT

## HOSPITAL NAME

Animal Hospital of  
Roxbury

## REFERRING VET

Dr. Elia

## INVOICE

15936

## DATE

1/25/23

## PRESENTING CLINICAL SIGNS

Housemate died HCM 2017. P diagnosed HCM 8/2019, last echo at that time. Dx hypertension 8/19. Grade 2 dental dz, BP in office 155/118 mean 119; HR 199. Current meds: Amlodipine

## ULTRASONOGRAPHIC EXAMINATION OF THE HEART

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
<b>NORMAL PARAMETER</b>	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
<b>PATIENT</b>		255	0.44	1.5	0.44	42	76.5
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/)	
<b>NORMAL PARAMETER</b>	<1.5	0.88-1.79	0.7-1.7	<1.6	<1.3	40-60	
<b>PATIENT</b>	1.2	1.2	1.2	1.15	1.1	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 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. No overt MR was present. The **left ventricle** presented normal thicknesses with minor a linear myocardial contour without evidence of hypertrophic tendencies, LV dilation, or restriction. The **myocardium** presented normal echogenicity with minor LV myocardial remodeling, yet no evidence of significant fibrotic or ischemic disease. **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. Trace TR was present on Doppler. 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. No arrhythmia was noted.



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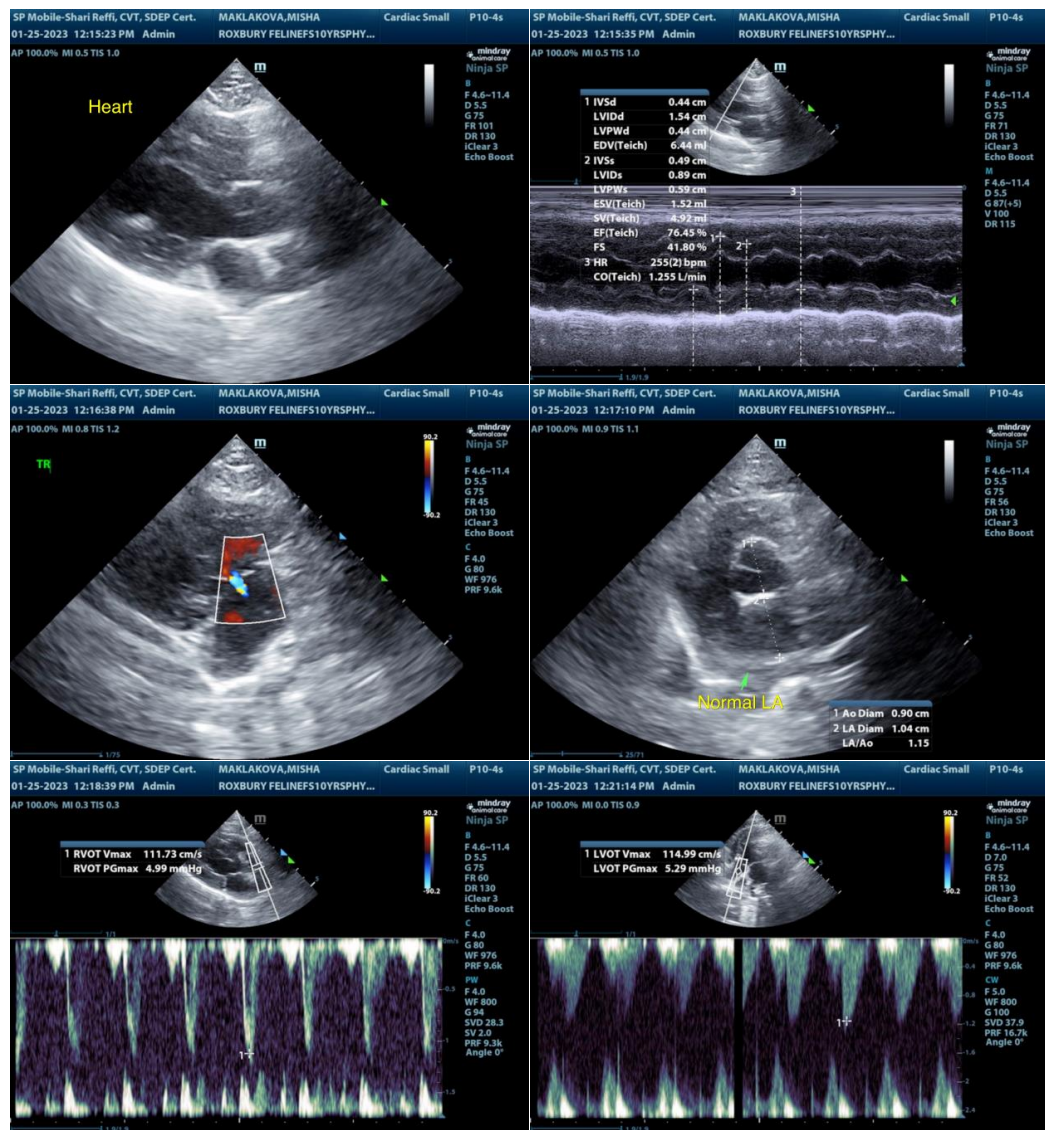
1/25/23

**ULTRASONOGRAPHIC FINDINGS**

- Normal echocardiogram with minor LV myocardial remodeling
- Normal LA
- Trace TR - clinically insignificant

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of significant structural or functional cardiomyopathy including no evidence of overt HCM criteria. The normal LA size without evidence of left or right heart chamber enlargement indicates that the risk of complication is low. No indication for cardiac medications. Recheck echocardiogram is suggested in 9-12 months, sooner if clinical signs suggestive of heart disease arise.





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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.

**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
**info@SonoPath.com**