

PATIENT

Nettie Cameron

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

3 Years

WEIGHT

3.2 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Queensway Vet
 Hospital

REFERRING VET

Dr. Alashraf

INVOICE

13420

DATE

01/27/26

PRESENTING CLINICAL SIGNS

- Findings: Nettie's examination went well. As we discussed, I felt a small gap between and on the left side ribs, which suggests a deformity in the ribcage. We want to do U/S to make sure the lungs and thoracic is fine

Abnormal PE/Chem/CBC/UA Results: Values Not done Primary Question to Be Answered in This Exam lung and thorax are ok

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

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	3.2	163	0.45	1.43	0.45	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	--	1.3	1.3		1.0	0.9	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 2 separate LA measurements. The cranial and caudal **mitral** valve leaflets presented normal linear structure and kinetics. The **left ventricle** presented normal thicknesses with linear contour and was not dilated nor restricted. The **myocardium** presented normal echogenicity without subjective 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. 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). The cranial **mediastinum** was free of masses in the visible window.

Sonographic assessment of the right thorax revealed mild right lung serosal surface comet tail artifact with concurrent pericardial comet tail artifact. The left lung was sonographically normal with no evidence of pleural effusion.



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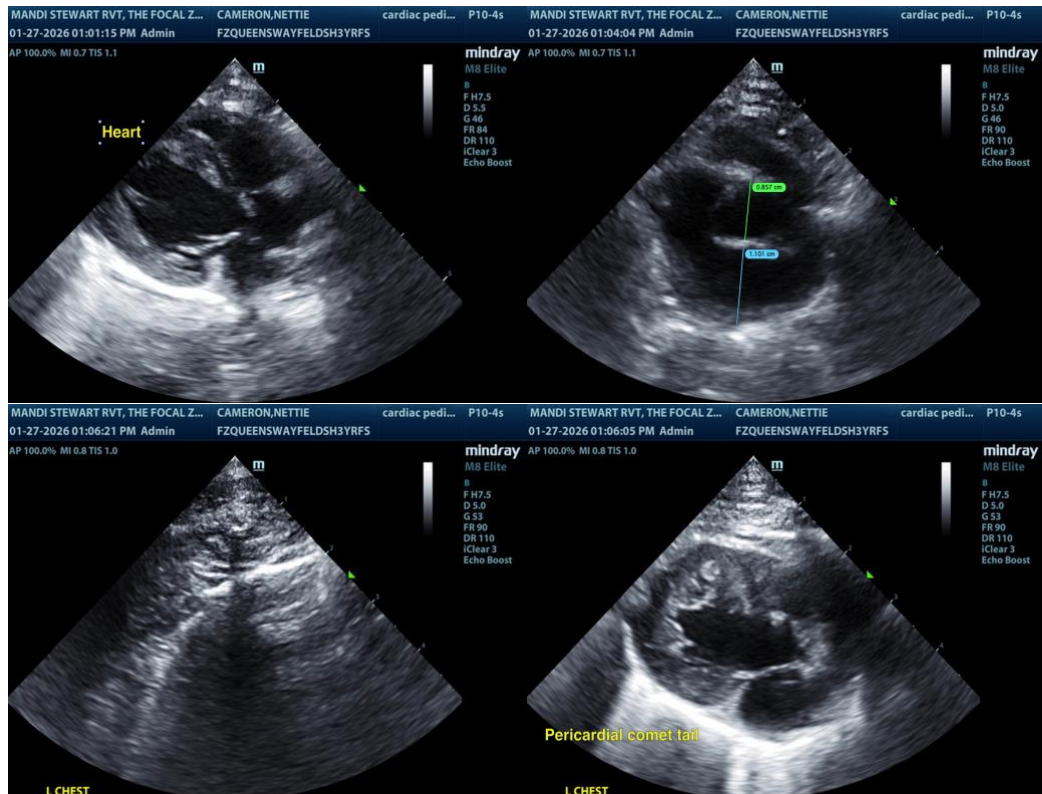
01/27/26

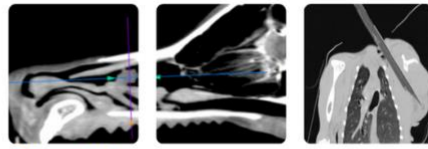
ULTRASONOGRAPHIC FINDINGS

- Normal echocardiogram.
- Mild nonspecific right lung and pericardial comet tail artifact.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No visualized overt thoracopulmonary or pericardial pulmonary pathology. The comet tail artifact mildly visualized in the right lung and pericardial area is nonspecific and potentially incidental yet may be associated with lung disease such as inflammatory disease, potential micro-consolidations or other. Correlation with three view chest radiographs and current respiratory signs for evidence of coughing, etc. If no evidence of pulmonary pathology on radiographs and no clinical signs suggestive of lung disease, the mild comet tail artifact is likely incidental.





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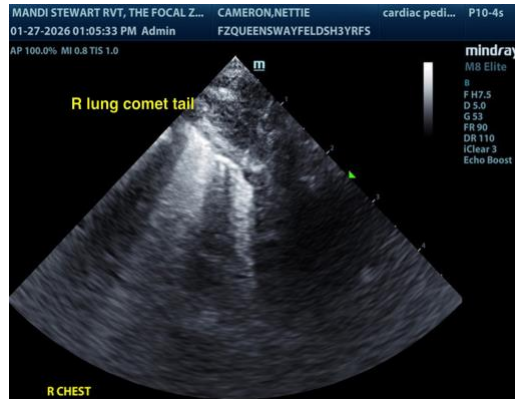
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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