



PATIENT

Evie Kelly McDonnell

SPECIES

Feline

BREED

Tortoiseshell

SEX

FS

AGE

18

WEIGHT

11

PRESENTING CLINICAL SIGNS

- Hypertension
- Arthritis

Abnormal PE/Chem/CBC/UA Results: Enlarged heart with grade III-IV/VI systolic murmur Severe dental calculus Bw- Elevated ALT, high normal CR

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

FELINE CARDIAC PARAMETERS	BODY WEIGHT	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	11	NM	0.4	1.4	0.45	40	75
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	1.0		1.0	1.6	NM
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)

IMAGING PERFORMED BY

Dr Sharkawy

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

Dr Lara

INVOICE

23711

DATE

01/29/2026

Cardiac Presentation

The echocardiogram in this patient demonstrated normal left atrial size and structure. Chamber volume and blood echogenicity were normal. 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. Minor MR on Doppler. The left ventricle presented normal 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 laminar flow with subjectively unremarkable structure. 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). No dilation due to heartworm disease, cor pulmonale, stenosis, or pulmonic hypertension was noted. No visible pericardial or free pleural fluid was noted. The mediastinum was free of masses in the visible window.



PATIENT

Evie Kelly McDonnell

SPECIES

Feline

BREED

Tortoiseshell

SEX

FS

AGE

18

WEIGHT

11

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Sharkawy

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

Dr Lara

INVOICE

23711

DATE

01/29/2026

ULTRASONOGRAPHIC FINDINGS

Primary

- Normal cardiac structure / function given age with LV myocardial remodeling /fibrosis
- Mild MR

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant clinical issues such as HCM criteria, left or right heart chamber enlargement, LV systolic dysfunction, or arrhythmia. The MR is mild with potential benign flow murmur possible. Regardless of classification, the hemodynamic effects of the murmur at this stage appear low. No indication for cardiac medication.

Anesthetic risk is considered mild to moderate given evidence of LV fibrosis and patient age. Assessment of systemic BP recommended if not recently done. Assuming no evidence of hypertension, the following anesthetic protocol is suggested with limited anesthetic time, judicious IV fluid administration and close clinical monitoring. 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.



PATIENT

Evie Kelly McDonnell

SPECIES

Feline

BREED

Tortoiseshell

SEX

FS

AGE

18

WEIGHT

11

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Sharkawy

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

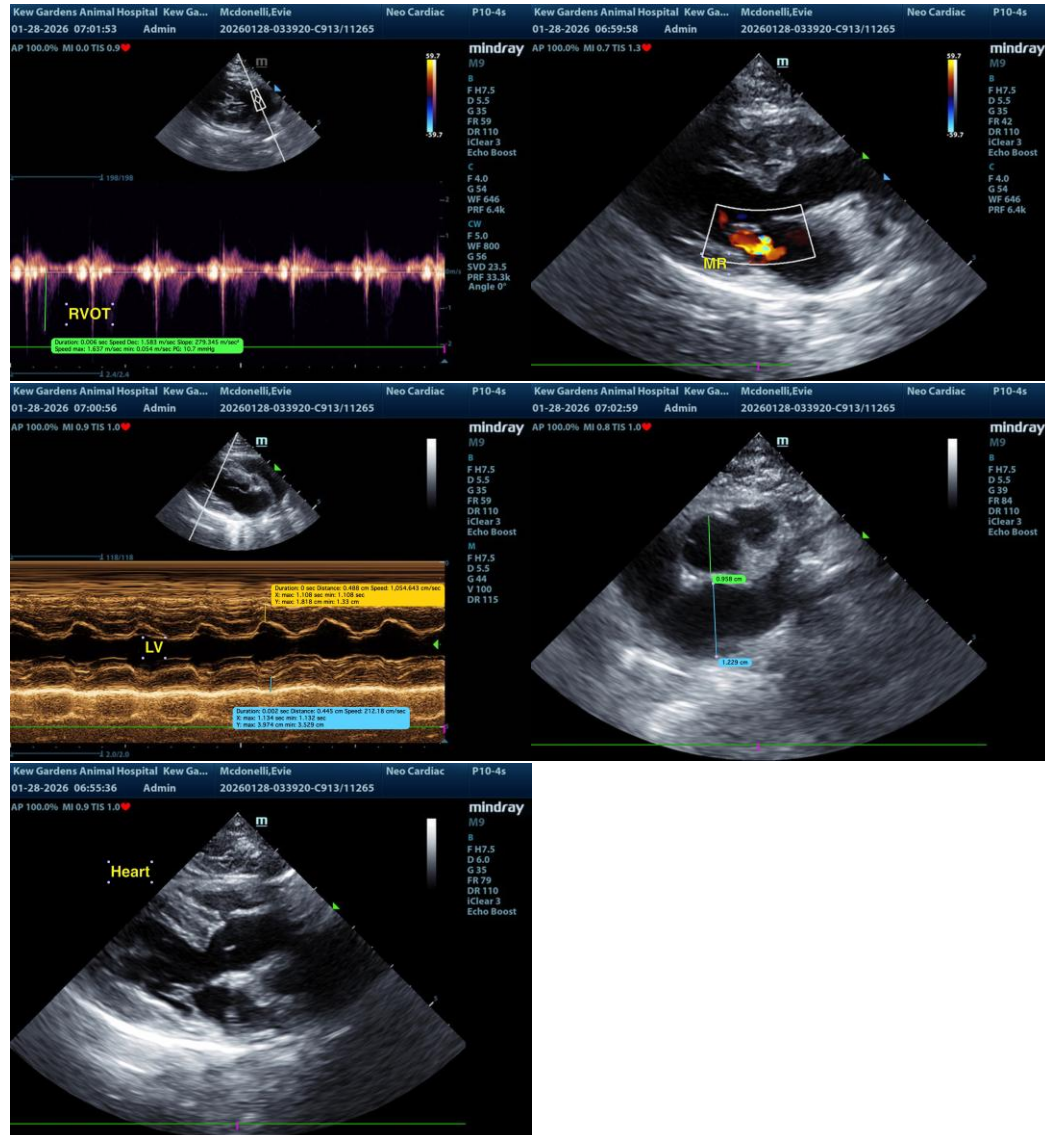
Dr Lara

INVOICE

23711

DATE

01/29/2026



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