

PATIENT PRESENTING CLINICAL SIGNS

Allison Smale 6 month recheck ultrasound. Has been on Atopica for cats 100mg/ml currently giving 2kg SID. Had 3/6 heart murmur at time of last echo which was July 2021.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE HEART

Feline

BREED

DSH

SEX

Spayed Female

AGE

12 Years

WEIGHT

3.96 kg

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		166	0.43	1.1	0.41	47.3	82.2
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	1.1	1.0	1.0		1.0	1.3	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 enlarged **left atrial** size based on 3 separate LA measurements. The cranial and caudal **mitral** valve leaflets presented normal linear structure and kinetics. The **left ventricular** septum and free wall revealed adequate contractility and normal left ventricular volume with echogenic remodeling in the septum and free wall. This does not appear to be a function issue at this point, and most consistent with some level of **myocardial fibrosis**. Evidence of progressive hypertrophic IVS or LV free wall changes was not noted. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and auricle revealed increased size and normal 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.

ULTRASONOGRAPHIC FINDINGS

- Static LV myocardial remodeling
- Normal left atrium

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

An overall similar presentation compared to the previous study without evidence of progressive cardiac changes or cardiomyopathy. The murmur remains likely a physiologic or flow murmur and considered incidental. The lack of left or right heart chamber enlargement as well as lack of systolic dysfunction continue to indicate that the risk of future complication is relatively low. No indication for cardiac

INTERPRETED BY

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

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Hawkins AH

REFERRING VET

Dr. Hawkins

INVOICE

34027

DATE

1/6/22



PATIENT

Allison Smale

medications. Continued monitoring for clinical signs including RR/RE recommended. Recheck echocardiogram may be considered in 6 months, sooner if potential murmur progression, or if clinical signs suggestive of heart disease develop.

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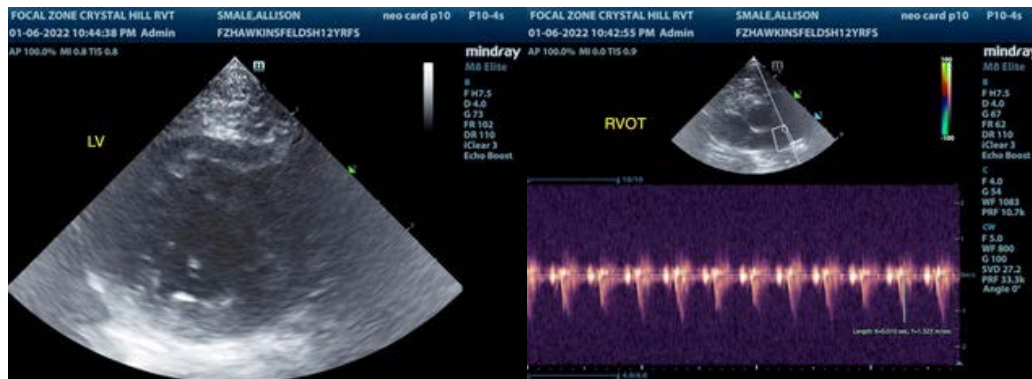
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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