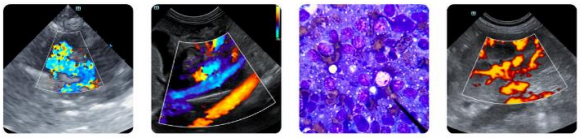


PATIENT

Barney Williams

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

7y, 4m

WEIGHT

11.1 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Smithfield AH

REFERRING VET

Dr. Boe

INVOICE

10502

DATE

1/6/26

PRESENTING CLINICAL SIGNS

Investigate murmur. Grade 1 heart murmur Torb/midaz sedation
Abnormal PE/Chem/CBC/UA Results: ProBNP 272

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		177	0.49	1.3	0.49	50	82
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	1.2	1.3		1.0	0.75	NM

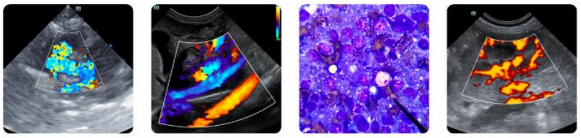
Adapted from June Boon,Veterinary Echocardiography,1998
Sisson D et al. JVIM 1991; 5: 232, Jacobs et al. Am J Vet Res 1985; 46:1705

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 evidence of MR on Doppler. The **left ventricle** presented normal thicknesses with linear contour and was not dilated nor restricted. Normal measured LVOT velocity was noted. 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. No evidence of TR 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). Normal measured RVOT velocity was noted. 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

- Normal cardiac structure / function



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

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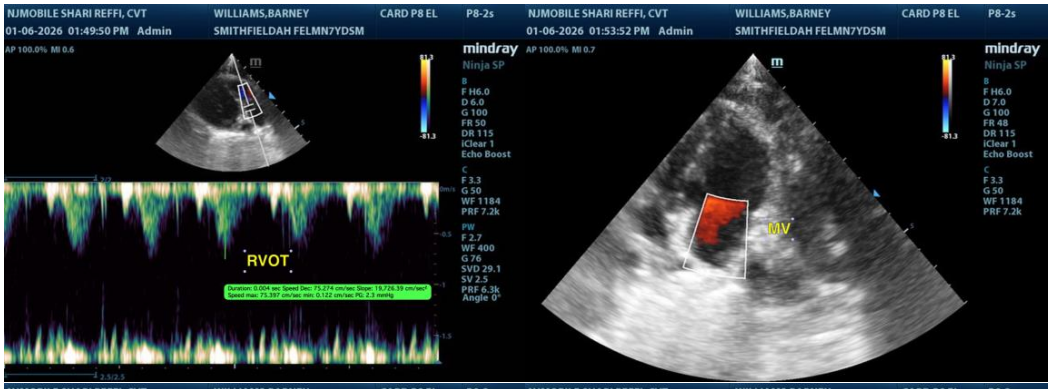
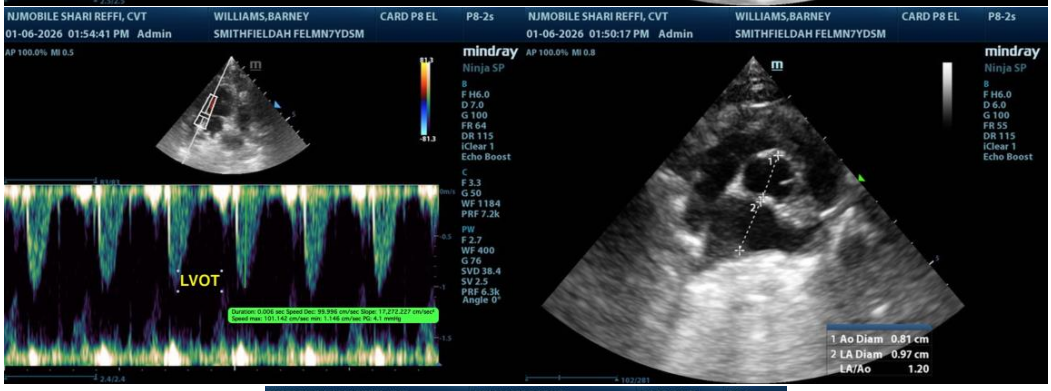
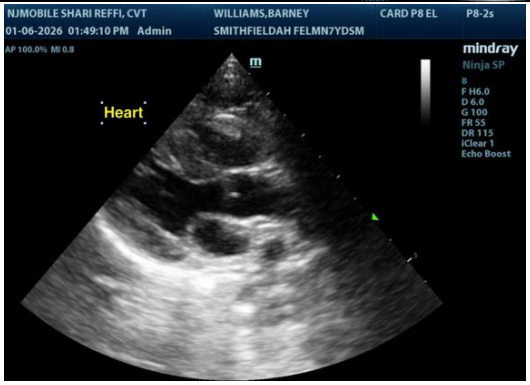
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

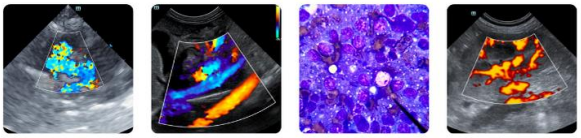
There is no evidence of clinical issues such as LV systolic dysfunction, left or right heart chamber enlargement, HCM criteria, or other cardiomyopathy. Assuming no evidence of dehydration or anemia, a benign flow murmur is probable. A small non-visualized flow abnormality cannot be definitively excluded, yet regardless of classification, the hemodynamic effects of the low-grade murmur are minimal. There is no indication for cardiac medications. There are no anesthetic contraindications if anesthesia is required. Conservative monitoring of the murmur going forward is advised. Recheck echocardiogram is suggested in 12 months, sooner if increase in murmur intensity.







New Jersey Mobile
FUELED BY SONOPATH VETERINARY ULTRASOUND



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info@sonopath.com 800.838.4268

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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