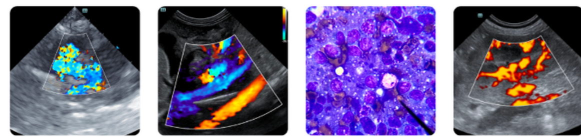


SonoPath FOSTERING THE ART OF VETERINARY MEDICINE™
www.SonoPath.com
info@sonopath.com 800.838.4268



**PATIENT**

Rexi Estrade

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

8 yrs

**WEIGHT**

14 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Kerri Becker

**HOSPITAL NAME**

Summit Dog and Cat Hospital

**REFERRING VET**

Dr. Nada

**INVOICE**

12800

**DATE**

11/13/25

## PRESENTING CLINICAL SIGNS

History: HM 4-5/6 in the pre-anesthesia. Wants to rule out HCM and cardiac dz before putting under anesthesia (if he is a good candidate)

Abnormal PE/Chem/CBC/UA Results: WNL

## 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 | 183 | NM | 0.67 | 1.46 | 0.63 | 46 | 80 |
| **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 | -- | 1.4 | 1.4 | | 1.6 | 1.4 | -- |
| Adapted from June Boon,Veterinary Echocardiography,1998<br>Sisson D et al. JVIM 1991; 5: 232, Jacobs et al. Am J Vet Res 1985; 46:1705 | | | | | | | |

### *Cardiac Presentation*

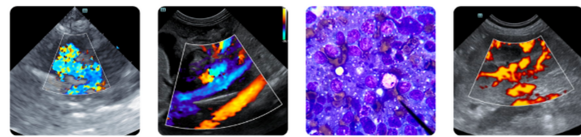
The left ventricular wall is mildly hypertrophied with regions of irregularity. Diffuse, mild, hyperechoic, non-uniform endocardium suggestive of mild fibrosis and ventricular remodeling. Mildly prominent papillary muscle hypertrophy with regions of remodeling. Normal left atrial dimension, no spontaneous contrast. Including the dynamic LV outflow profile, subjective mildly thickened mitral valve leaflets without overt definitive visualized systolic anterior motion (SAM) of the mitral valve. Although not excluded, dynamic outflow profile on doppler with mild eccentric MR noted. There is mild to moderate eccentric mitral regurgitation present secondary to SAM. Normal right atrial size. Normal right ventricle size. Normal RVOT velocity. No TR. No other obvious valvular regurgitation is present. There is no pericardial effusion noted. No pleural effusion appreciated. No obvious cardiac tumors.

## ULTRASONOGRAPHIC FINDINGS

- Compensated mild hypertrophic/hypertrophic obstructive cardiomyopathy phenotype
- Eccentric MR and dynamic LV outflow profile on doppler

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The murmur is secondary to MR with contributing factor owing to dynamic LV outflow profile but potentially suggestive of non-visualized dynamic LV outflow obstruction/SAM. Regardless of classification, the lack of LA enlargement indicates the future risk of complication at this stage is low.





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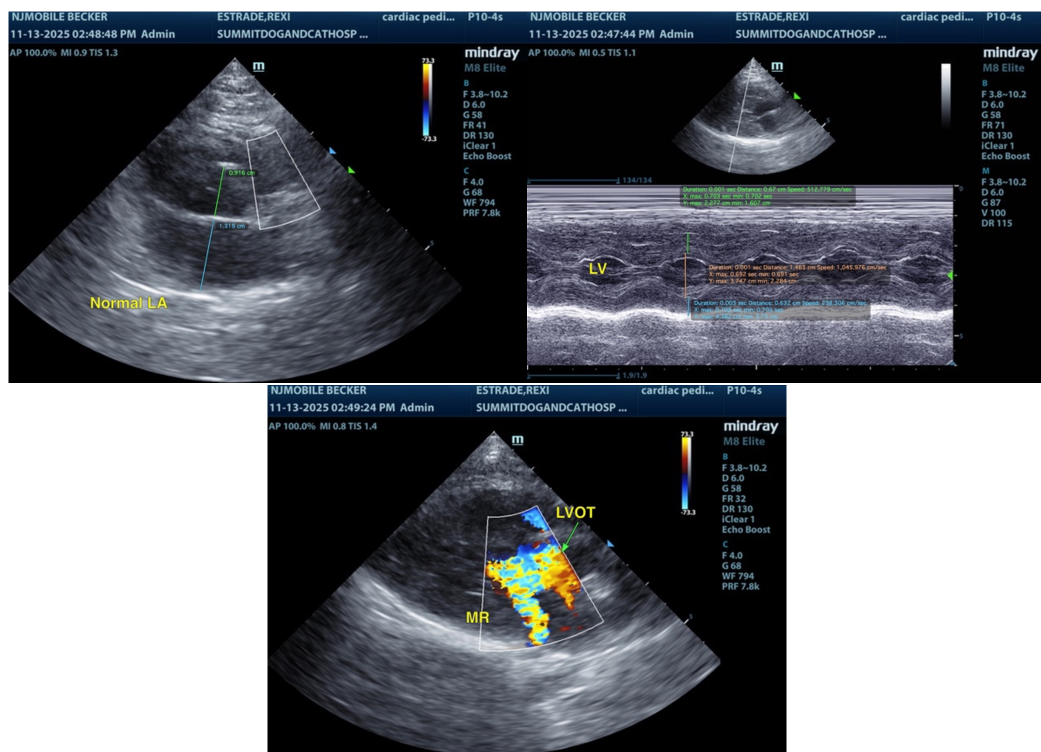
In an assumed non-clinical patient without evidence of chamber enlargement, no overt indication for cardiac medication. HCM is a rule out diagnosis once the patient is deemed euthyroid and normotensive. Monitoring of T4 level and systemic BP for complicating factors going forward is advised. Current anesthetic risk is considered mild. Sonographic monitoring required for further assessment and prognosis. Recheck echo recommended in 6 months, sooner if clinical signs arise or increase in murmur intensity.

The following anesthetic protocol is suggested. 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.

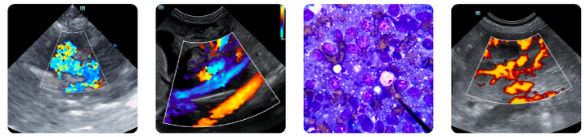



**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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





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