


PATIENT

Smudge Mazzola

PRESENTING CLINICAL SIGNS

History of hyporexia, patient only eating tuna. Increased RR = 32, intermittent murmur.

Current meds: Cerenia and famotadine.

SPECIES

Feline

Abdominal ultrasound performed on 11/15/2022, findings: "The pancreatic changes are most consistent with mild to moderate acute or chronic active pancreatitis. If the patient was fasted for this study, the presence of ingesta within the gastric lumen could suggest delayed gastric emptying." - A. Nicastro.

BREED

DSH

ULTRASONOGRAPHIC EXAMINATION OF THE HEART
SEX

FS

AGE

13yr

WEIGHT

9.9lb

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		100	0.35	1.5	0.35	48	78
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		1.36	1.3		0.7		
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							

INTERPRETED BY

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

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. 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). 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.

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Our House Call Vet

REFERRING VET

Dr. Mazzola

INVOICE

12197ag

ULTRASONOGRAPHIC FINDINGS

- Normal echocardiogram

DATE

11/21/2022



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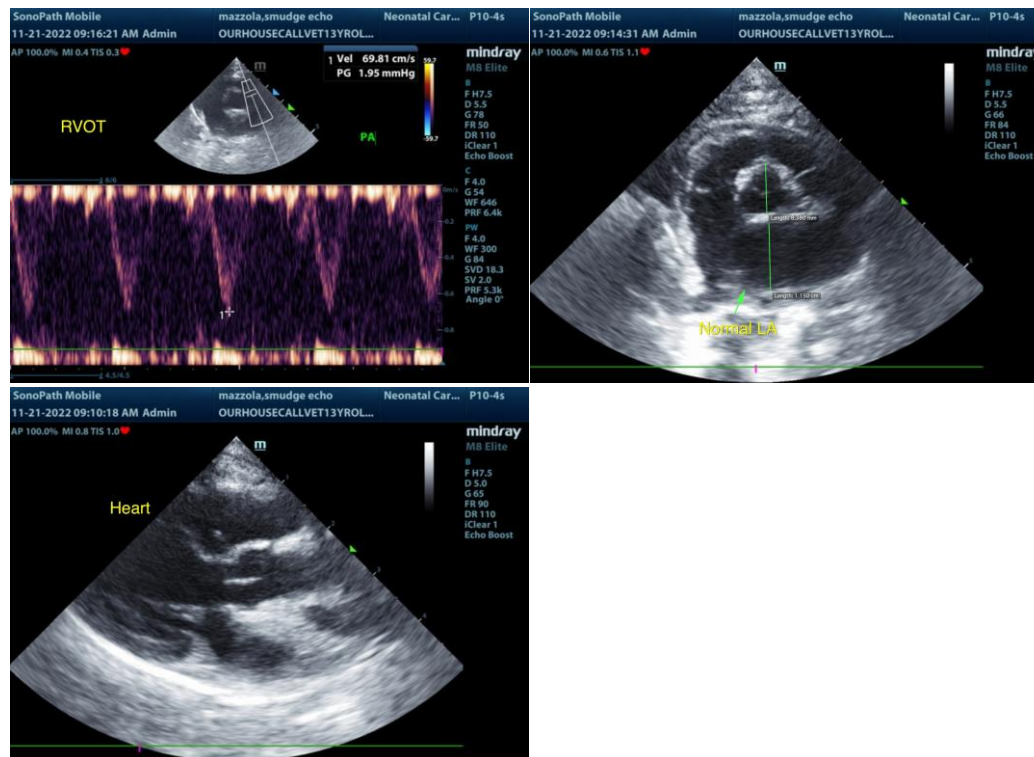
12197ag

DATE

11/21/2022

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of structural or functional cardiomyopathy was present. The intermittent murmur is likely secondary to benign physiologic or flow murmur without evidence of clinical issues such as left or right heart chamber enlargement, LV systolic dysfunction, valvular insufficiencies or clinical pulmonary hypertension. Conservative monitoring is recommended with potential recheck sonogram in 6-12 months, sooner if murmur intensity increases or clinical signs of heart disease arise.



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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