

PATIENT

Motley Hamm

PRESENTING CLINICAL SIGNS

Rapid abdominal breathing with some coughing, but nothing productive. No discharge or sneezing seen. Abnormal PE/Chem/CBC/UA Results: No heart murmur. 3 view chest rads abnormal.

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED

DSH

SEX

NM

AGE

10 Years, 5 Months

WEIGHT

15.6 lbs

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		186	0.42	1.8	0.42	39	72.7
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		1.5	1.5		1.2	NM	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							

INTERPRETED BY

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

IMAGING PERFORMED BY

Rachel Runnells, RVT

HOSPITAL NAME

SVS Imaging Kansas
City

REFERRING VET

Dr. Jonathon Renfro

INVOICE

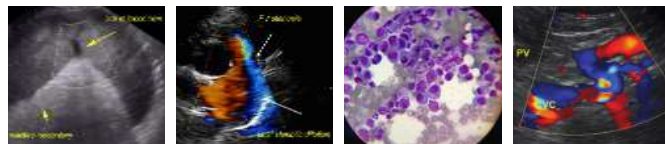
48924

DATE

12-10-21

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). Moderate free pleural fluid exhibiting mild subjective cellular component was present. Potential areas of atypical nonhomogeneously echogenic lung tissue noted. Distinct or overt cranial mediastinal, pericardial, or thoracopulmonary masses were not definitively evident. No evidence of obvious concurrent pericardial free fluid.



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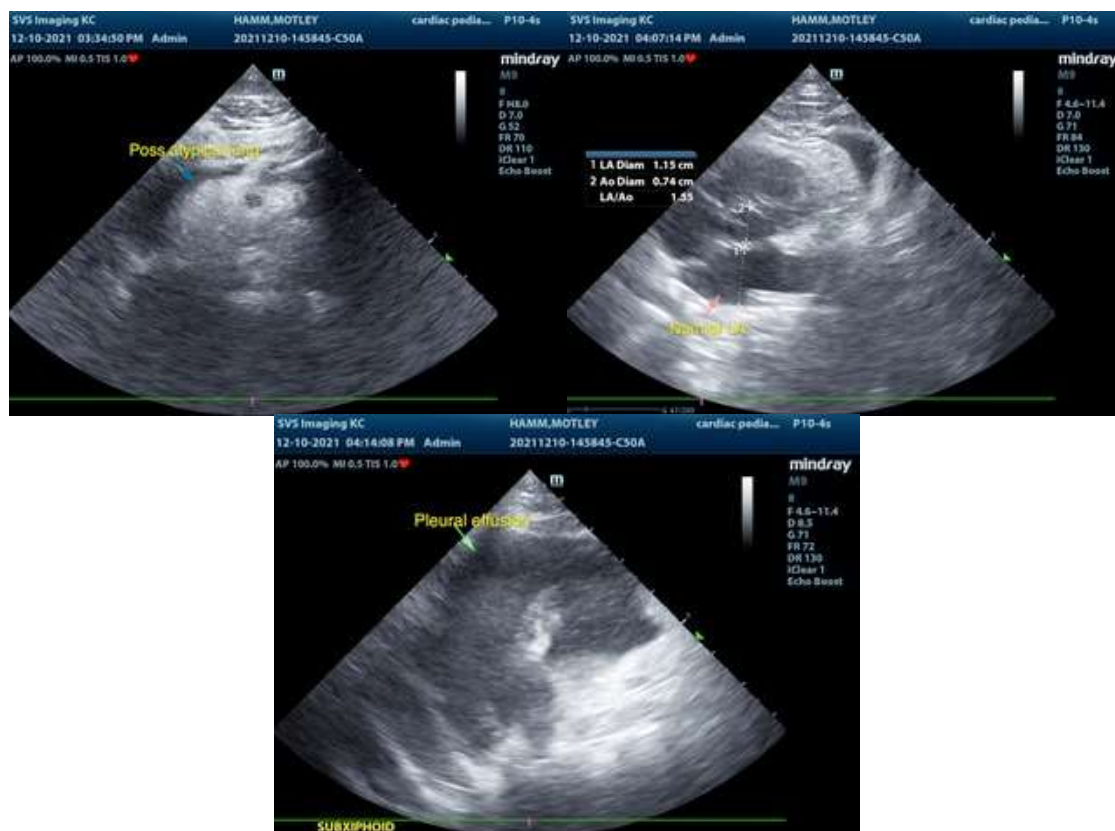
Dr. Jonathon Renfro

ULTRASONOGRAPHIC FINDINGS

- Overtly normal cardiac function, no evidence of left or right heart chamber enlargement or systolic dysfunction.
- Pleural effusion.
- Possible atypical lung.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the overtly normal cardiac structure and function, noncardiogenic pleural effusion is most likely. Potential considerations may include neoplasia, infection/inflammation, primary pulmonary disease such as pneumonia, consolidation, or other possible. Technically, FIP is a differential diagnosis in this patient yet thought unlikely given the patient's age. Further assessment may include thoracocentesis for effusion analysis, cytology, +/- culture and sensitivity if clinically indicated.

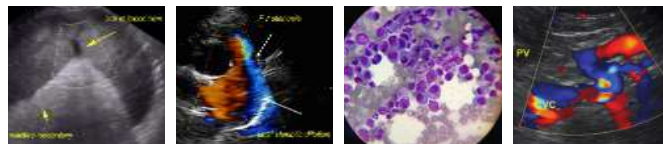


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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Feline

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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