



PATIENT PRESENTING CLINICAL SIGNS

Ginger Panthaki

Findings: Since last monday the cat started having heavy breathing and open mouth breathing. FIV positive for 7 years now Presented on Dec 6, 2025 for initial exam. He vomits 3 times/ month but no diarrhea BAR , Pale and moist m.m Heavy abdominal breathing at the clinic Thoracocentesis done under sedation, aspirated approx 400 ml fluid from R. side of thorax Transthoracic ultrasound to assess for a cranial mediastinal mass was recommended by radiologist report Came today as heavy breathing returned and cat was gasping. Thoracocentesis repeated today. Current Medications n/a Sedated with propofol and torb for exam

SPECIES

Feline

BREED

DSH

Abnormal PE/Chem/CBC/UA Results: See attached Primary Question to Be Answered in This Exam cause of pleural effusion, rule out heart disease

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

SEX

MN

AGE

12yr

WEIGHT

14.15lb

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	--	212	0.42	2.4	0.42	21	45
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	2.8	2.5	2.5		0.9	0.6	NM

INTERPRETED BY

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

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Creditview Eglington

REFERRING VET

Ghobrial

INVOICE
23216

DATE
12/11/2025

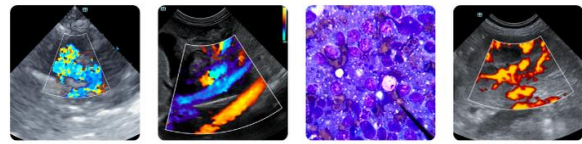
Cardiac Presentation

Significant LV dilation with diminished systolic function was present. Increased LV sphericity with normal LV wall thickness. Severe LA enlargement with evidence of LA spontaneous contrast. The mitral valve was mildly thickened with normal extension in systole and union in diastole. Mild centralized MR present on Doppler. The tricuspid valve was mildly thickened with mild TR on Doppler. Concurrent mild to moderate right atrial and mild ventricular dilation. The aortic valve was overtly normal with mild decreased measured LV outflow velocity. Normal pulmonic valve structure with mildly decreased measured RV outflow velocity. No obvious AI / PI. Mild volume pericardial effusion with moderate volume pleural effusion. Possible tachycardia. No obvious cardiac tumors.

ULTRASONOGRAPHIC FINDINGS

Primary

- Severe cardiomyopathy exhibiting left heart volume overload including biatrial dilation, decreased LV function and possible tachycardia
- Mild MR / TR



PATIENT

- Mild volume pericardial and moderate volume pleural effusion

Ginger Panthaki

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

The cardiac presentation may indicate primary cardiomyopathy i.e. DCM like criteria with potential for end-stage HCM yet may also be secondary to conditions such as taurine deficiency, myocarditis or infiltrative disease such as lymphoma. Regardless of classification, CHF is present with potential for concurrent arrhythmia pending ECG analysis. Long-term prognosis is poor. Correlation with diet history and troponin level may be considered. Continued hospitalization with injectable Lasix in an attempt to stabilize patient is recommended.

Feline

BREED

DSH

SEX

MN

If patient is stabilized, discharge Lasix 1-2 mg/kg PO BID, clopidogrel 75 mg tab, PO SID and Pimobendan 1.25 mg PO BID. Going forward, this patient is at severely increased risk for progressive CHF, progressive malignant arrhythmia and sudden death. The pericardial and pleural effusion is cardiogenic in origin, no overt concurrent pulmonary pathology. Monitoring of renal parameters, BP, +/- ECG is indicated. A recheck echo is suggested in 3-4 months, sooner if clinically indicated.

AGE

12yr

WEIGHT

14.15lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Creditview Eglington

REFERRING VET

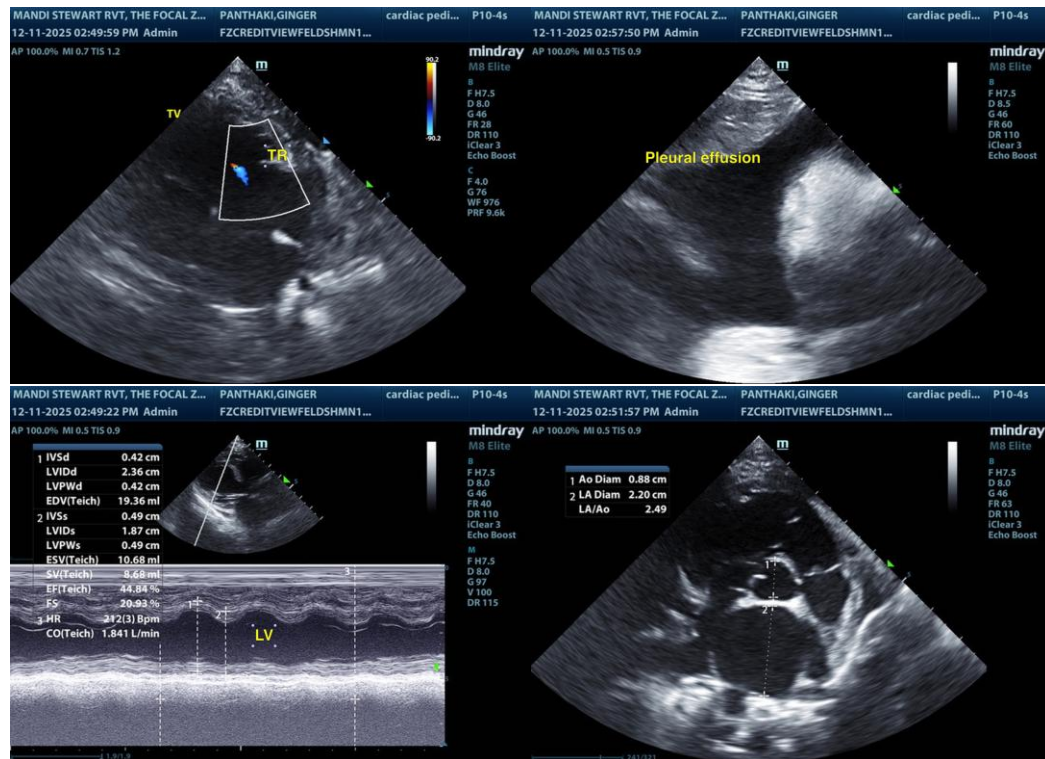
Ghobrial

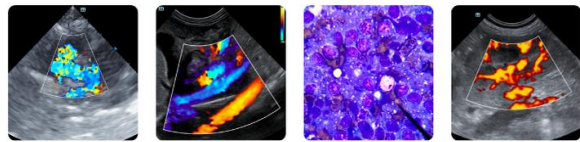
INVOICE

23216

DATE

12/11/2025





PATIENT

Ginger Panthaki

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

12yr

WEIGHT

14.15lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Creditview Eglington

REFERRING VET

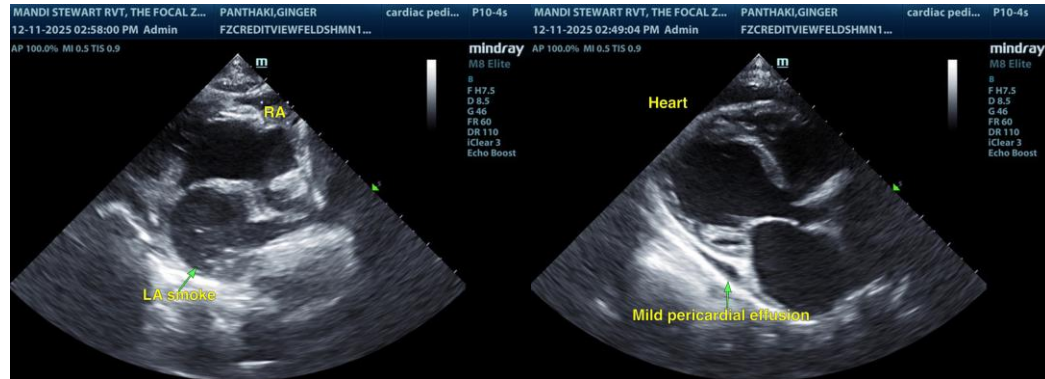
Ghobrial

INVOICE

23216

DATE

12/11/2025



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