



## PATIENT PRESENTING CLINICAL SIGNS

Kira Rogozynski grade 2 murmur, severe stomatitis-will have full mouth extractions at specialist under GA HR 100, RR 24

## SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE HEART

Feline

BREED

DLH

SEX

Neutered Male

AGE

11 Years

WEIGHT

8 Pounds

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		194	0.39	1.58	0.37	48.7	83.7
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	1.34	1.26	1.3	1.0	1.1	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. 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.

### ULTRASONOGRAPHIC FINDINGS

- Normal echocardiogram

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overtly normal cardiac structure and function with no overt cause of the murmur identified. In the absence of significant volume changes such as dehydration or anemia, suspect a physiologic flow murmur, which may present at elevated heart rates, or small flow abnormality not visualized in this study. Correlation with baseline lab work recommended. No clinical issues such as systolic dysfunction or left or right heart chamber enlargement were present.

### INTERPRETED BY

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

### IMAGING PERFORMED BY

Kelly Reschny

### HOSPITAL NAME

Yates Vet Hospital

### REFERRING VET

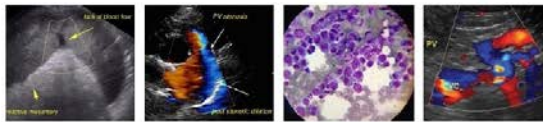
Dr. Krizmanich

### INVOICE

33450

### DATE

12/15/21



**PATIENT**

Kira Rogozynski

Given these findings, despite non-obvious murmur, the risk of potential complication is low. No indication for cardiac medications. Conservative monitoring of the murmur with recheck echocardiogram in 6 months (specifically if the murmur persists or progresses) is suggested. No anesthetic contraindications based on this study. 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.

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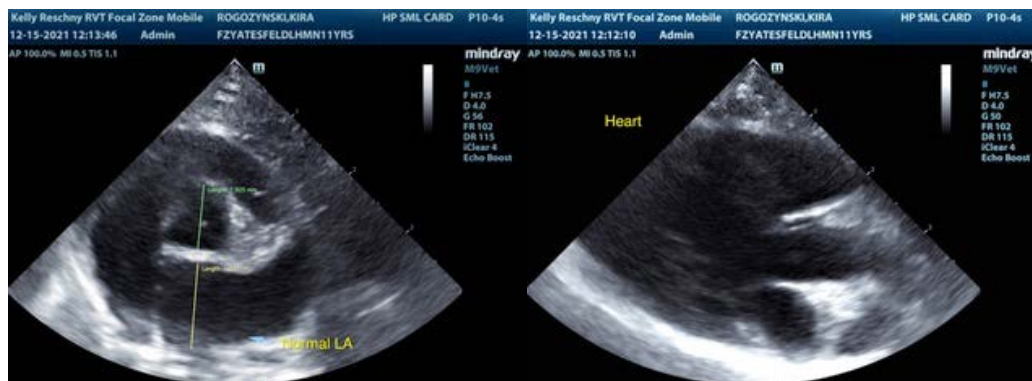
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Feline)



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Kelly Reschny

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.

**HOSPITAL NAME**

Yates Vet Hospital

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.

**REFERRING VET**

Dr. Krizmanich

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)  
info@SonoPath.com

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