



PATIENT

Dumpling CHEN

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

11

WEIGHT

9.5

PRESENTING CLINICAL SIGNS

The pet was all of a sudden wobbling and meowing, caouldn't walk straight

Abnormal PE/Chem/CBC/UA Results: Bw- moderately elevated BG, Mild Neutrophilia ProBNP-positive Currently, the patient walks fine and doesn't seem in pain

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	--	NM	0.53	1.33	0.57	44	76
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	--	1.16	1.2		1.0	0.6	NM

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

Dr Sharkawy

HOSPITAL NAME

Kew Gardens Animal Hospital

REFERRING VET

Dr Bassem

INVOICE

23107

DATE

12/04/2025

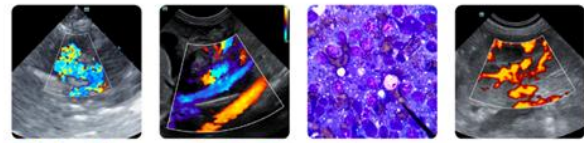
Cardiac Presentation

The echocardiogram in this patient demonstrated normal left atrial size and structure. Chamber volume and blood echogenicity were normal, no LA spontaneous contrast present. The cranial and caudal mitral valve leaflets presented minor irregular age-related changes that are not clinically significant at this time with adequate extension in systole and union in diastole. No evidence of MR on Doppler or evidence of SAM. The left ventricle presented normal free wall and septal thicknesses with alinear contour. The myocardium presented some echogenic remodeling consistent with expected age-related change or mild fibrosis. Contractility of the ventricular walls was adequate and in normal range for this breed and patient size. The left ventricular outflow tract demonstrated normal laminar flow with subjectively unremarkable structure. Subjective assessment of the right atrium and auricle revealed normal size, structure and content. No evidence of masses was noted. Tricuspid valvular assessment demonstrated expected findings for this age patient. The right ventricle was of normal size (1/3 diameter of LV), echogenicity and thickness. Pulmonic tract assessment revealed normal valve structure, laminar flow, and diameter (approx.1:1 pa/ao ratio). No dilation due to heartworm disease, cor pulmonale, stenosis, or pulmonic hypertension was noted. No visible pericardial or free pleural fluid was noted. The mediastinum was free of masses in the visible window.

ULTRASONOGRAPHIC FINDINGS

Primary

- Normal LA /RA



PATIENT

- Mild LV myocardial remodeling with adequate LV systolic function

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

No evidence of significant clinical issues such as left or right heart chamber enlargement, HCM criteria, LV systolic dysfunction, LA spontaneous contrast or thrombus, valvular insufficiencies, arrhythmia, or pulmonary hypertension. Although a previous cardiogenic event as a cause of the patient's clinical signs, i.e. paroxysmal arrhythmia, cannot be definitively excluded, it appears unlikely based on this exam. Assessment of systemic BP and ECG for contributing factors such as hypertension or arrhythmia may be considered. No indication for cardiac medication. Echocardiographic monitoring is required for further assessment. Recheck echo recommended in 6-12 months, sooner if recurrent clinical signs or progressive elevated BNP.

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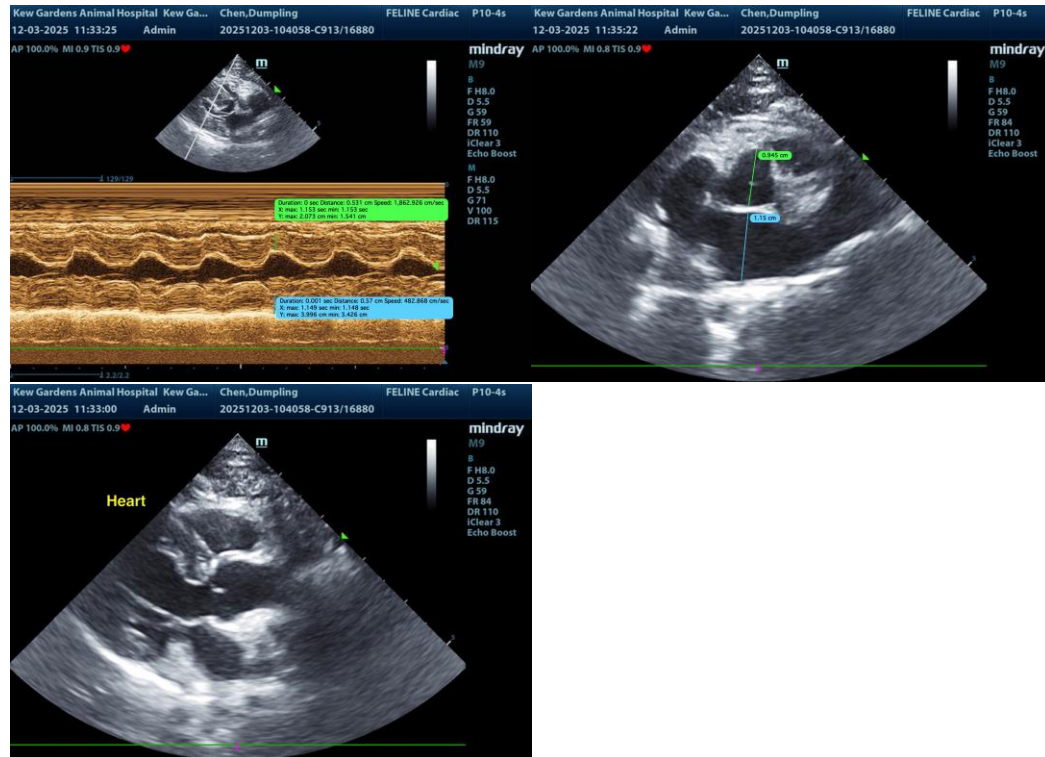
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@sonopath.com

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