



## PATIENT

Shadow Brady

## SPECIES

Feline

## BREED

Maine Coon

## SEX

Neutered male

## AGE

10 years

## WEIGHT

19.8 pounds

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Kelly Vazquez

## HOSPITAL NAME

New Bridge  
Veterinary Practice

## REFERRING VET

Dr. Glennon

## INVOICE

10169ag

## DATE

03/15/2022

## PRESENTING CLINICAL SIGNS

History: Strongly suspect HCM. ProBNP elevated. Started on Plavix therapy after possible saddle thrombus.

Abnormal PE/Chem/CBC/UA Results:

## 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		159	0.54	1.95	0.54	28.7	59.2
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	NM	3.1	2.4		1.1	0.6	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 left ventricular wall exhibited normal thickness with areas of remodeling and regions of asymmetry. Mildly increased to hyperechoic endocardium suggestive of fibrosis was observed. LV systolic function is decreased. LV and borderline RV dilation were present, the left atrium was severely dilated and bulbous in appearance. Anechoic content was present without overt evidence of spontaneous contrast or organized thrombus. The right atrium also exhibited moderate dilation containing anechoic content and was without evidence of spontaneous contrast. The mitral valve appeared overtly normal with mild eccentric MR. The tricuspid valve presented overtly normal with mild eccentric TR. The subjective blood flow through the LVOT and RVOT was laminar and overtly normal in velocity with no overt evidence of pericardial or free pleural fluid. Intermittent nonspecific tachyarrhythmia was noted. No obvious cardiac tumors were observed.

## ULTRASONOGRAPHIC FINDINGS

- Severe cardiomyopathy exhibiting biatrial dilation and LV systolic dysfunction.
- Mild MR/TR.
- Intermittent to consistent tachyarrhythmia.



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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

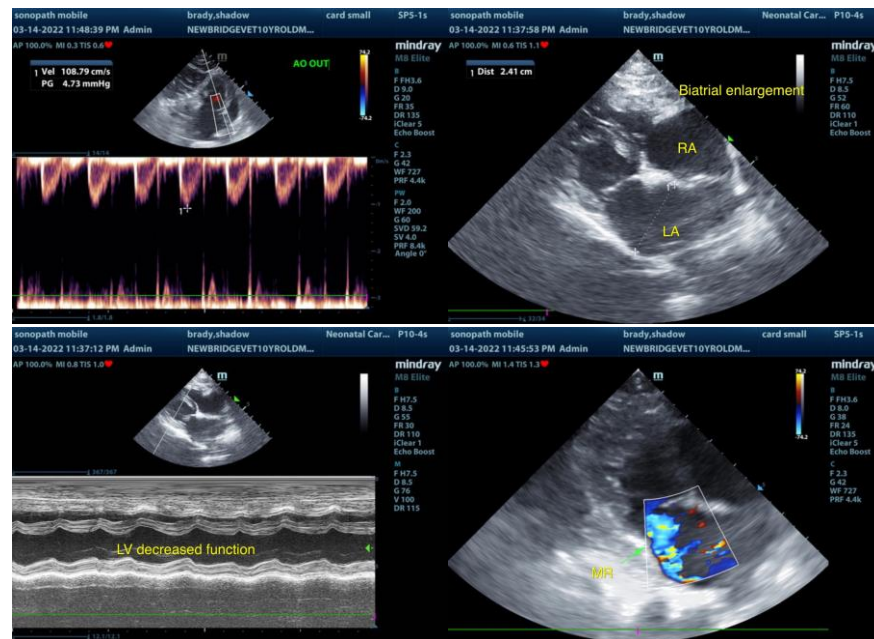
The presentation of biatrial enlargement in the face of normal LV wall thickness may suggest unclassified cardiomyopathy although burned out or end stage HCM can have this appearance. Significant LV systolic as well as likely concurrent diastolic dysfunction was present given subjective myocardial remodeling and possible fibrosis.

Overt evidence of spontaneous contrast or thrombus was not definitively evident yet potential for previous thromboembolic episode is possible.

Regardless of classification the degree of biatrial dilation and concurrent arrhythmic disease indicated that the current and future risk of episodes of CHF, development of malignant arrhythmias and potential for sudden death is significantly elevated.

The long-term prognosis is likely poor yet medical therapy is suggested. Continued clopidogrel, Lasix 1-2 mg/kg PO BID and off label Pimobendan 1.25 mg PO BID would be warranted. ECG assessment to further classify arrhythmia and monitoring of BP and renal values is recommended. Baseline monitoring of resting respiration rate is also suggested.

Recheck echocardiogram may be considered in 4-6 months or sooner if episode of CHF or other clinical signs arise.





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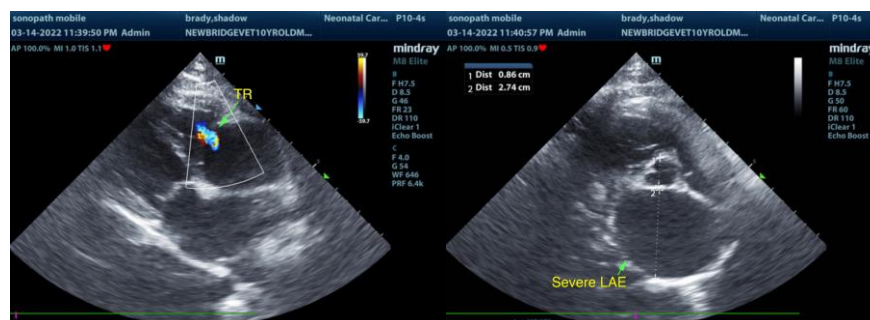
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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