

PATIENT

Coaltrain Rukas

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

16.7 years

WEIGHT

11.14 lbs.

INTERPRETED BY

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

IMAGING

PERFORMED BY

Renee Ziegler-Post

HOSPITAL NAME

For Cats Only VC

REFERRING VET

Renee Ziegler-Post

INVOICE

10823

DATE

4/21/26

PRESENTING CLINICAL SIGNS

Presented with seizure activity, administered Midazolam, abnormal proBNP. Blood pressures 167/128, 166/128, 167/128, 165/125

Abnormal PE/Chem/CBC/UA Results: RBC 7.69, WBC 6.81 BG 119, SDMA 11, Crea 1.4, BUN 45 potassium 3.6, glob 5.5, liver values normal proBNP Abnormal usg 1.047 T4 2.1

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

FELINE CARDIAC PARAMETERS	BODY WEIGHT	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	11.14 lbs	NM	0.49	1.66	0.51	51	85
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	-	1.45	1.6		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							

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 2 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.



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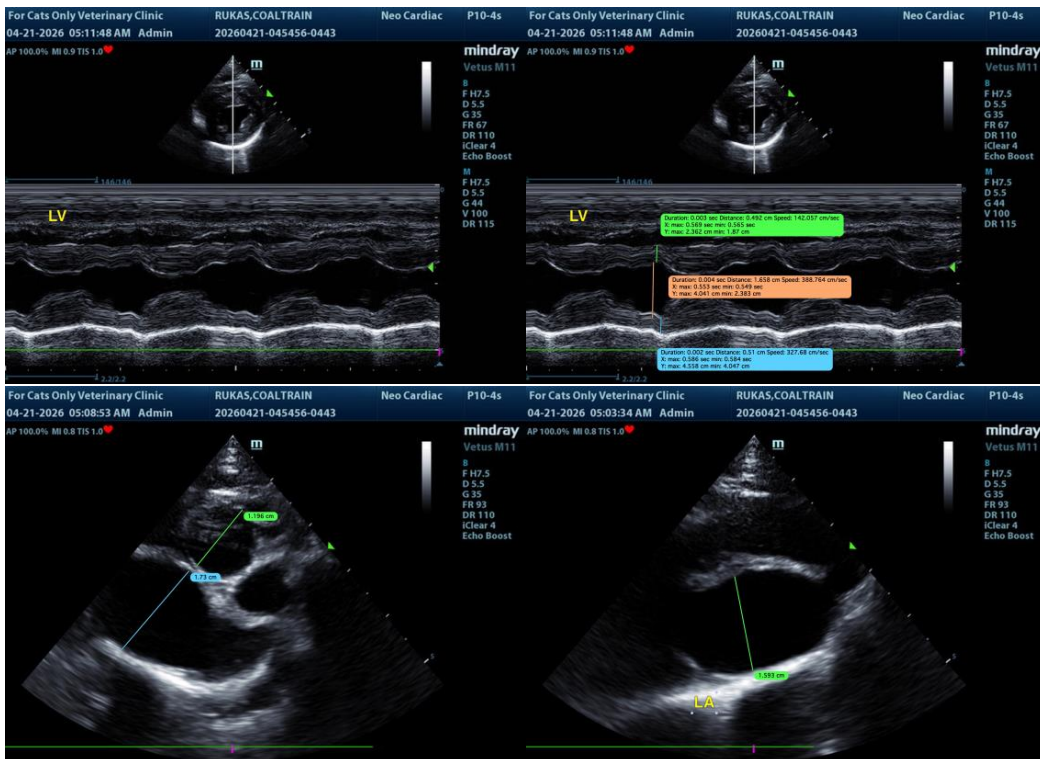
4/21/26

ULTRASONOGRAPHIC FINDINGS

- Subjective normal cardiac structure/function

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt sonographic clinical issues such as left or right heart chamber enlargement, LV systolic dysfunction, or obvious arrhythmia. Elevated BNP level in the absence of overt cardiomyopathy may be secondary to hyperthyroidism, renal insufficiency, airway disease, systemic hypertension, or other systemic influences which may be considered. There is no obvious indication for cardiac medications. ECG may be considered to assess for paroxysmal arrhythmia, given seizure activity. A recheck echocardiogram is recommended if clinical signs suggestive of cardiac disease or progressive elevated BNP are noted.



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