



PATIENT

Albert Rice

PRESENTING CLINICAL SIGNS

History: Recheck Echo- Murmur present Family history of HCM Diagnosed with HCM B1 in 2024

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

4 Years 8 Months

WEIGHT

8.25 Pounds

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	3.75	194	0.46	1.38	0.53	63.77	--
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	NM	1.41	--		1.15	1.49	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

INTERPRETED BY

Sara Brethel DVM, DACVIM (Cardiology)

LVIDs: 0.5, TR VMX: 1.29

Cardiac Presentation

The mitral valve leaflets are normal and there is no mitral regurgitation. The left atrial size is normal. There is no evidence of systolic anterior motion of the mitral valve and no evidence of a left ventricular outflow tract obstruction. Left ventricular systolic and diastolic function is within normal limits. There is equivocal evidence of concentric hypertrophy. There is normal right atrial size with trivial tricuspid regurgitation. There is no prolapse of the tricuspid valve leaflets and no evidence of pulmonary hypertension on the images provided. The right ventricle appears normal in structure and function subjectively. The aortic and pulmonic valves have normal morphology and the corresponding outflow velocities are within normal limits. There is no evidence of pulmonic or aortic insufficiency. The aorta appears normal. The pulmonary artery and associated branches appear normal. There is no evidence of pleural effusion, pericardial effusion, or intracardiac masses.

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

King VH

REFERRING VET

Dr. Aldridge

ULTRASONOGRAPHIC FINDINGS

- Equivocal concentric hypertrophy
- Trivial tricuspid regurgitation

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35402

DATE

1/14/26

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient historically has had a diagnosis of hypertrophic obstructive cardiomyopathy, however concentric hypertrophy and obstruction and mitral regurgitation are not identified on the images



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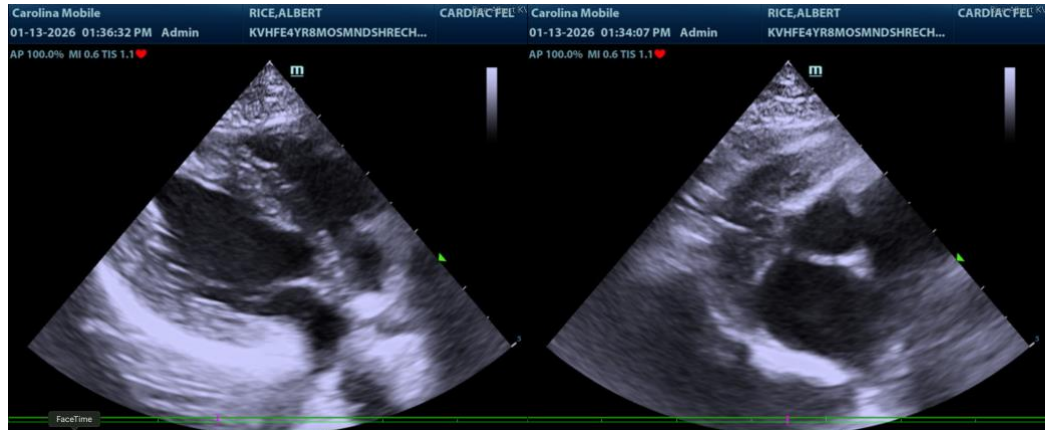
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provided. There is equivocal concentric hypertrophy of the posterior wall and trivial tricuspid regurgitation. No cardiac therapies are recommended. A recheck echo is recommended 10-12 months to monitor for any changes.



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.

Sara Brethel DVM, DACVIM (Cardiology)

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