



PATIENT

Watson Rigling

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years

WEIGHT

13.9 Pounds

INTERPRETED BY

Sara Brethel, DVM,
 DACVIM (Cardiology)

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Animal Care Center

REFERRING VET

Dr Rigling

INVOICE

35609

DATE

1/28/26

PRESENTING CLINICAL SIGNS

- 3/6 L sided murmur.
- Arrythmia auscultated 1/25/26
- Neuropathy (related to lumbosacral disease)
- Hypothyroidism (treated with l-131 8/2023)
- ABNORMAL Labwork Values: 7/2025 ALP 11, 6/2023 Cardiopet BNP 48, New labs pending 7/26/26
- For ECHO Only: Blood Pressure: 150/120 (132)
- HR/RR/BP: HR: 180 RR: 34
- Current Medications: Pregabalin 25mg BID

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	6.32	NM	0.45	1.65	0.57	--	--
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	1.05	1.14	--		Underest	1.24	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

MR VMAX: 3.32

ECG Interpretation

Sinus rhythm with one ventricular premature complex identified in the rhythm strips provided.

Cardiac Presentation



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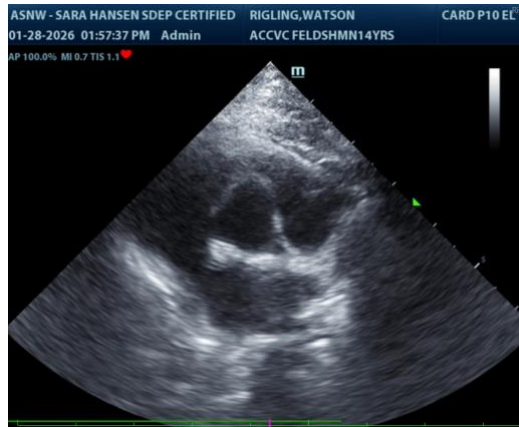
The left atrium is within normal limits. The mitral valve leaflets are normal and there is mild mitral regurgitation. There is no evidence of systolic anterior motion of the mitral valve. There is equivocal concentric hypertrophy of the left ventricle. The right atrium is normal. The tricuspid valve is normal without evidence of tricuspid regurgitation. The right ventricle appears to have preserved systolic function subjectively. The aortic and pulmonic valves are normal without evidence of insufficiency. Aortic and pulmonic outflow velocities are within normal limits. The aorta and PA are normal along with the associated PA branches. There is no evidence of pleural effusion, pericardial effusion, or intracardiac masses.

ULTRASONOGRAPHIC FINDINGS

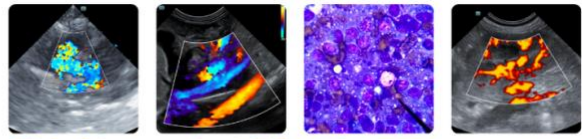
- Mitral regurgitation
- Normal left atrial size
- Equivocal concentric hypertrophy of the left ventricle
- VPC

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The murmur is due to the mitral regurgitation. There is equivocal concentric hypertrophy, likely with a concern that there is early onset of hypertrophic cardiomyopathy. Recommend ensuring the patient is euthyroid. In the history, it states hypothyroidism, however, there is a history of being treated with i131. Given the normal blood pressure, hypertensive phenotype is considered less likely. The VPC may be secondary to the equivocal changes, however, stress and other physiologic causes cannot be ruled out. Recommend ensuring that full lab work is within normal limits and not contributing to the VPC. No cardiac therapies are recommended. Would recommend a recheck ECG and echo in 6 months, sooner if the murmur is changing or the patient is developing other cardiovascular clinical signs.



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.



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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)

info@SonoPath.com