

**PATIENT**

Miso Tobin

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

7 Years 11 Months

**WEIGHT**

13.1 Pounds

**INTERPRETED BY**

Sara Brethel, DVM,  
DACVIM (Cardiology)

**IMAGING PERFORMED BY**

Sarah Green

**HOSPITAL NAME**

Healing Spirit Animal  
Wellness

**REFERRING VET**

Sarah Green

**INVOICE**

35496

**DATE**

11/13/25

**PRESENTING CLINICAL SIGNS**

History of right anal sac impaction. Scheduled for anal saccullectomy in February 2025. Procedure aborted due to bradycardia noted following anesthesia which was minimally responsive to atropine. ECG and thoracic radiographs obtained later that day showed a normal HR and sinus rhythm. Mild cardiomegaly was noted on radiographs. NT-proBNP was WNL at that time and on recent recheck 1 week ago. Weight loss was recommended.

Abnormal PE/Chem/CBC/UA Results: Miso remains overweight but has had gradual weight loss of 4.3 Lbs. since February. No murmur or arrhythmia detected. No adventitious lung sounds. Primary abnormality is impacted/ inflamed right anal sac.

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
<b>NORMAL PARAMETER</b>	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
<b>PATIENT</b>	5.95	NM	0.34	1.4	0.4	--	--
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/)
<b>NORMAL PARAMETER</b>	<1.5	1.6	0.7-1.7		<1.6	<1.3	40-60
<b>PATIENT</b>	--	1.0	--		NM	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 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 no evidence of left ventricular concentric hypertrophy. There is normal right atrial size without evidence of 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. 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.



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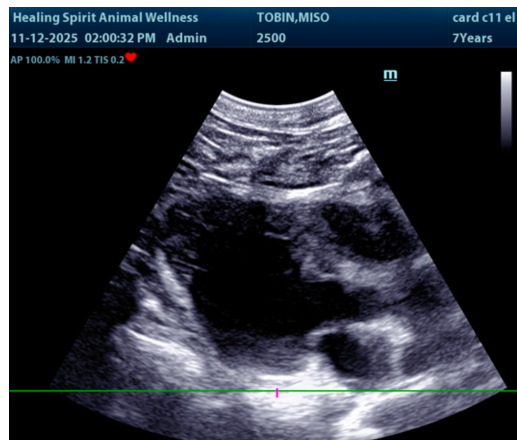
11/13/25

## ULTRASONOGRAPHIC FINDINGS

- Structurally normal heart

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The heart is structurally normal. The cause of the patient's reaction to anesthesia is unknown. Can consider submission of an electrocardiogram for further review. Otherwise, consider a different anesthetic protocol for the patient.



**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)

[info@SonoPath.com](mailto:info@SonoPath.com)