

PATIENT

Bear Di Paola

SPECIES

Feline

BREED

DLH

SEX

Spayed Female

AGE

15 Years

WEIGHT

3.71 kg

INTERPRETED BY

Sara Brethel DVM,
 DACVIM (Cardiology)

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Snelgrove VC

REFERRING VET

Dr. Somal

INVOICE

36840

DATE

12/10/25

PRESENTING CLINICAL SIGNS

History: prev AUS performed in May 2025, last cardiac ultrasound done Feb 2025 went to referral through MOVEH in May - suspected that Bear is suffering from a chronic enteropathy with a degree of colitis, b12 and cobalamin normal at that time was started on milbemax, probiotic and HA diet patient represented Dec 8th 2025 to SVS for not eating in 3 days, was switched back to T/D diet at some point and was doing well on this until now gr 1-2 heart murmur.

Abnormal PE/Chem/CBC/UA Results: ABNORMAL Labwork Values Stage 1 IRIS , low phosphorus rest WNL Prev US reports attached.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

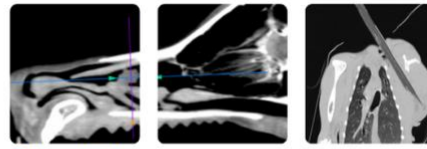
FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
PATIENT	3.71	NM	0.6	1.47	0.41	--	--
FELINE CARDIAC PARAMETERS	LA/AO (M-mode)	LA/AO HEART BASE (Sisson)	LAD LA MAX 4 Chamber		LVOT VEL. (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		1.4			0.89	0.97	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							

ECG Interpretation

Normal sinus rhythm

Cardiac Presentation

The left atrium is within normal limits. The mitral valve leaflets are normal and there is no mitral regurgitation. There is no evidence of systolic anterior motion of the mitral valve and no evidence of a left ventricular outflow tract obstruction. There remains mild concentric hypertrophy of the interventricular septum. 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.



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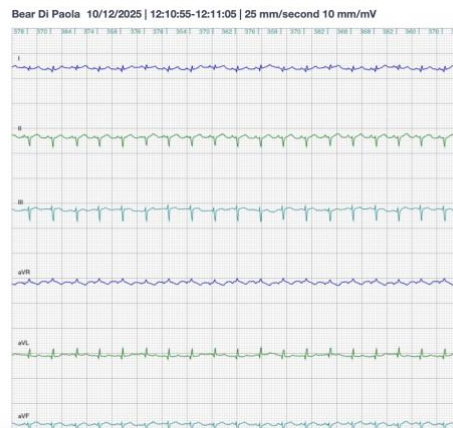
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ULTRASONOGRAPHIC FINDINGS

- Sinus rhythm
- Mild concentric hypertrophy of the interventricular septum

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient remains to have mild changes associated with hypertrophic cardiomyopathy. Recommend continuing to ensure the patient remains normotensive and euthyroid. No cardiac therapies are recommended at this time. The murmur is considered innocent versus physiologic. The rhythm is sinus. A recheck echocardiogram is recommended in 10-12 months, sooner if the patient is developing cardiovascular clinical signs or decompensating.



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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