



PATIENT

Nala Rosa Halvorson

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

5 Years

WEIGHT

10 Pounds

INTERPRETED BY

Sara Brethel, DVM,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Dr. Andrea Nason

HOSPITAL NAME

Caravan Vet

REFERRING VET

Dr. Andrea Nason

INVOICE

35876

DATE

2/18/26

PRESENTING CLINICAL SIGNS

- Nala presented for a routine wellness exam and lab screening
- Screening proBNP 222
- No appreciable murmur, but patient is also mildly reactive and growled during most of auscultation
- Cardiac work up to assess for underlying heart disease. ECG and chest radiographs attached
- Abnormal PE/Chem/CBC/UA Results: ProBNP 222 Blood pressure 120 systolic T4 - 2.4 ug/dL Crea 1.7

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	4.5	NM	0.45	1.66	0.46	58.1	--
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	--	1.27	--		--	~0.7	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

LVIDs: 0.8

Chest Radiographic Interpretation

The cardiac silhouette is within normal limits. The pulmonary vasculature is normal along with the pulmonary parenchyma. The extrathoracic structures within view are unremarkable.

ECG Interpretation

Normal sinus rhythm

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



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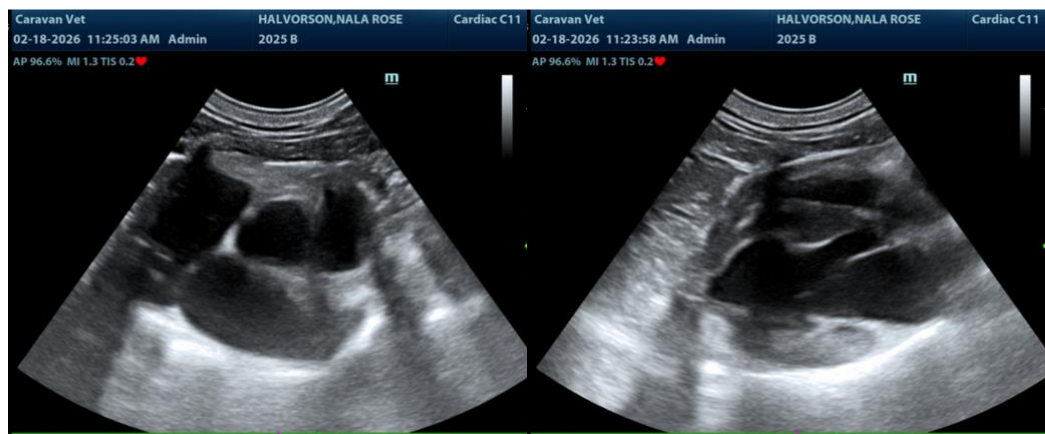
ventricular outflow tract obstruction. Left ventricular systolic and diastolic function is within normal limits. There is no evidence of left ventricular concentric hypertrophy. There is normal right atrial size without evidence of tricuspid regurgitation. There is no prolapse of the tricuspid valve 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 and pulmonic corresponding outflow velocities are normal. 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.

ULTRASONOGRAPHIC FINDINGS

- Normal heart

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient's heart is normal on the images provided. The cause for the elevated proBNP does not appear to be cardiac. It may be elevated secondary to the underlying creatinine elevation. With the history of having an elevated proBNP, a recheck echocardiogram can be considered in 10-12 months.



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