



**PATIENT**

Nyla Bey

**PRESENTING CLINICAL SIGNS**

History: P presented for echo due to intermittent arrhythmia.

**SPECIES**

Feline

**BREED**

Siamese

**SEX**

Spayed Female

**AGE**

7 Years

**WEIGHT**

9.7 Pounds

**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>	4.4	180	0.45	1.42	0.52	50.7	--
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>	--	1.29	--		0.9	0.92	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: 0.7

**IMAGING PERFORMED BY**

Kathleen Byrnes

**ECG Interpretation**

The rhythm is sinus with negative QRS complexes, and leads 1, 2, 3 and AVF. The QRS complexes appear mildly prolonged. Sinus rhythm with a bundle branch block. Rule out left anterior fascicular block versus a right bundle branch block.

**HOSPITAL NAME**

Midway AC

**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 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.

**REFERRING VET**

Dr. Lakey

**INVOICE**

35968

**DATE**

2/24/26

**ULTRASONOGRAPHIC FINDINGS**



**PATIENT**

- The heart measures within normal limits. There is either a left anterior fascicular block versus a right bundle branch block.

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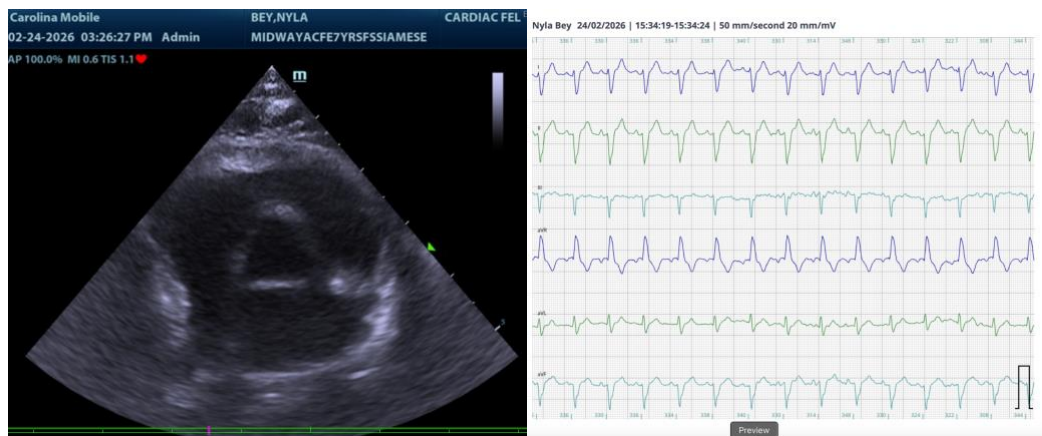
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The patient's structural cardiac measurements are normal. An arrhythmia is not identified but there is evidence of a block which could indicate early onset of cardiac disease or primary conduction disorder. No cardiac therapies are recommended. If there is concern for persistent intermittent arrhythmia, you can consider a Holter monitor. Recheck ECG and echo in 6 to 12 months, just to monitor for any concurrent changes, sooner if cardiovascular clinical signs are developing.



**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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