

PATIENT

Daniel Britt

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

10 Years 7 Months

WEIGHT

12.5 pounds

INTERPRETED BY

Sara Brethel DVM,
 DACVIM (Cardiology)

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Animal Hospital
 Newton Conover

REFERRING VET

Dr. Sechrist

INVOICE

14971

DATE

04/08/26

PRESENTING CLINICAL SIGNS

P presented for recheck echo Previous Echo 5/1/24. Left ventricular concentric hypertrophy. Normal left atrial size. Possible defect with an interatrial septum

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	5.68	NM	0.56	1.38	0.55	--	--
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	NM	1.7	1.7	1.14	1.28	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

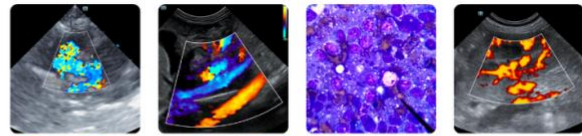
The left atrium is mildly enlarged. The mitral valve leaflets are normal and there is no mitral regurgitation. There is no evidence of systolic anterior motion of the mitral valve and no evidence of a left ventricular outflow tract obstruction. There is equivocal concentric hypertrophy of the left ventricle. 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. There remains some echo dropout within the intra-atrial septum, however a true atrial septal defect is not identified.

ULTRASONOGRAPHIC FINDINGS

- Equivocal left ventricular concentric hypertrophy.
- Mild left atrial enlargement.
- Possible atrial septal defect.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient's left atrium is mildly enlarged. I would recommend starting clopidogrel at a dose of a ¼ of a 75 mg tablet once daily (18.75 mg). The left ventricle is equivocally concentric hypertrophied. No additional therapies are indicated at this time. The client can consider keeping an eye on breathing



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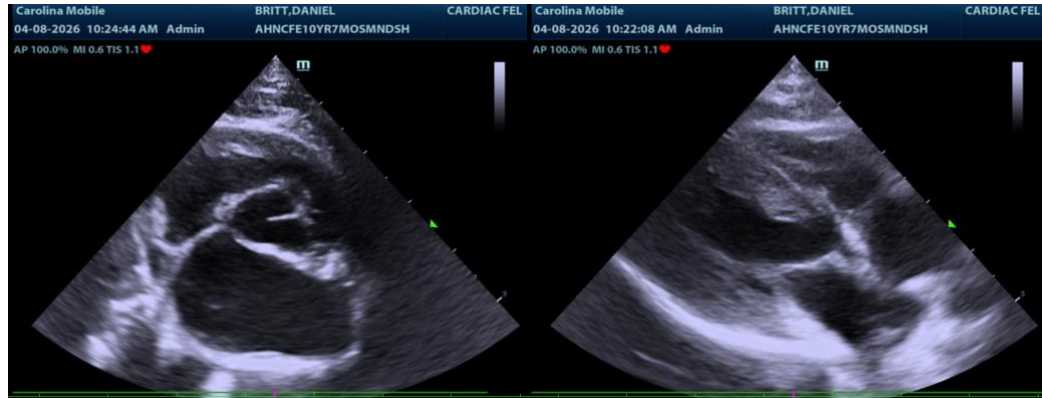
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rates. The client should start monitoring respiratory rate and effort at home if not already doing so. The resting respiratory rate should be < 35-40 breathes/minute when the patient is resting or sleeping. If the breathing rates are increasing, then chest radiographs are recommended. Recheck echo is recommended in 6 to 12 months, sooner if the patient is developing cardiovascular clinical signs or develops a heart murmur.



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