

601 Vernon Tharp Street Columbus, OH 43210 Phone: (614) 292-3551 Fax: (614) 292-2053	ECHOCARDIOGRAPHY REPORT - CARDIOLOGY & INTERVENTIONAL MEDICINE SERVICE THE OHIO STATE UNIVERSITY VETERINARY MEDICAL CENTER John Bonagura, DVM, DACVIM Karsten Schober, DVM, DECVIM Jaylyn Rhinehart, DVM, DACVIM Michelle Rohrbaugh, DVM Samantha Kochie, DVM Alicia Byrd, RVT Olivia Stepp, RVT
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Patient Number: 000 452711

Species: FEL

Sex: Male

Patient Name: Sweeney, Highlander Peterbuilt

Breed: Maine Coon

Weight (kg): 8.9 kg

Date of study: 12/18/2017

Age: 6

BSA: 0.43 m²

Diagnosing Cardiologist: JDB

Birthdate: 01/17/2011

Systolic BP:

Diagnosis & Recommendations

Normal Echocardiogram - normal values for the large size of this cat
 No evidence of hypertrophic cardiomyopathy on this follow up examination

WNL+JDBonagura

Clinical Findings

The echocardiogram was performed as a screen for hypertrophic cardiomyopathy (HCM) phenotype.

Auscultation: sinus rhythm; no murmurs or gallop sounds.

Screening Exam for Feline Hypertrophic Cardiomyopathy; details: This examination includes subjective evaluation of long and short axis images from the parasternal (intercostal) right-sided acoustic windows. M-mode examination of the LV is also performed. The examination screens for ventricular hypertrophy using 2D long and short axis image planes as well as the standard M-mode images with the cursor placed dorsally to the posterior papillary muscle. Left atrial size is also assessed subjectively and by long-axis maximal diameter. Doppler studies are only performed if needed to evaluate gallop sounds or any murmurs if present.

Echocardiographic Findings

The examination was performed without sedation. The technical examination was of diagnostic quality and the patient was sufficiently cooperative. Recheck Echo: This patient has prior echocardiograms on file. Focused 2D and M-mode examinations along with selected Doppler studies were directed to specific clinical issues. This examination demonstrated the following:

Normal chamber size for breed

Normal systolic function

No valvular issues

<u>2D Measurements</u>		<u>M-Mode</u>	<u>Doppler Measurements</u>
LA Diam	19.9 m m	IVSd	5.3 m m
LA2D/LVIDd	0.9 (0.8 - 1.1)	LVIDd	21.1 m m
IVSd-max-Laxis	5.3 m m	LVPWd	5.2 m m
LVPWd-max-Saxis	5.4 m m	IVSs	8.1 m m
		LVIDs	9.0 m m
		LVPWs	10.7 m m
		EDV(Teich)	14.5 ml
		ESV(Teich)	1.5 ml
		EF(Teich)	89.4 % (> 48.0)
		%FS	57.4 % (> 25.0)
		SV(Teich)	13.01 ml
		LVPWd/LVIDd	0.25
		Ao Diam	13.8 m m
		LA Diam	17.0 m m

	LA/Ao	1.2	
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Abbreviations: N=normal or WNL=within normal limits; N/E=not evaluated; NSF=no significant findings; EF=ejection fraction; FS=fractional shortening
FAC=fractional area change; LA=left atrium; LV=left ventricle; RA=right atrium; RV=right ventricle; PA=pulmonary artery
PHT=pulmonary hypertension; PR (or PI) = pulmonary regurgitation (insufficiency); AV = aortic valve; AR=aortic regurgitation; MV=mitral valve
AMV=anterior mitral leaflet; PMV=posterior mitral leaflet; MR=mitral regurgitation; TV=tricuspid valve; TR=tricuspid regurgitation