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ECHOCARDIOGRAPHY REPORT - CARDIOLOGY SERVICE
THE OHIO STATE UNIVERSITY VETERINARY MEDICAL CENTER

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Patient Number: 000 459205

Patient Name: Sweeney, Angtini Rayne of Highlander

<u>Date of study:</u> **09/06/2016** Diagnosing Cardiologist: **JDB** Breed: Maine Coon

Species: FEL

Age: 1 Birthdate: 06/05/2015 Sex: Female
Weight (kg): 4.1 kg

BSA: 0.26 m²
Systolic BP:

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 technical examination was of high quality and the patient was sufficiently cooperative. Normal 2D & M-mode Study (Doppler studies not performed):

There were no congenital or acquired structural cardiac lesions observed by 2D echocardiography.

All cardiac chambers and great vessels were within normal size limits.

There were no overt valvular lesions.

Left ventricular ejection fraction (shortening fraction) was normal.

Diagnosis & Recommendations

Normal Examination WNL

2D Measurements			M-Mode			Doppler Measurements
LA Diam	15.2 m m		IVSd	4.3 m m		
LA2D/LVIDd	0.9	(0.8 - 1.1)	LVIDd	16.8 m m		
IVSd-max-Laxis	4.8 m m		LVPWd	4.5 m m		
LVPWd-max- Laxis	4.8 m m		IVSs	6.7 m m		
			LVIDs	10.3 m m		
			LVPWs	6.3 m m		
			EDV(Teich)	8.2 m l		
			ESV(Teich)	2.2 m l		
			EF(Teich)	73.0%	(> 48.0)	
			%FS	39.0%	(> 25.0)	
			SV(Teich)	5.96 m l		

Echocardiogram Reported by: John D. Bonagura, DVM, DACVIM (Cardiology, Internal Medicine) ______