



PATIENT DISCHARGE SUMMARY

OSU Case Number: 000448316
Client: Teresa Sweeney
Patient: Forest Pearl Jd
Referring Veterinarian: Vca Sawmill Fax: (614) 766-2470
Date Admitted: 8/6/2020 Date Discharged: 8/6/2020
Patient Status: Released
Clinician: Jaylyn Rhinehart DVM, DACVIM (Cardiology)

Columbus Small Animal 614-292-3551
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Final Diagnosis:

Structurally normal heart
No evidence of congenital heart disease
No evidence of hypertrophic cardiomyopathy

History and Clinical Problems:

Forest Pearl JD (AKA JD) is a 6 year old male Maine Coon cat that presented to The Ohio State University College of Veterinary Medicine Cardiology Service for echocardiographic certification of cardiac health. He has been doing well and there are no concerns about him. JD is currently eating free choice Solid Gold dry cat food, Royal Canin dry cat food, and Stella and Chewy raw coated kibble. There are several cats in the house and different diets are placed in separate bowls so all cats can be free choice. JD also is fed one can of Fancy Feast wet food a day.

Diagnostic Procedures and Physical Findings:

Physical Exam:

Wt. 12.53 kg (27.5 lbs.) T: 96.7 (axillary) P: 192 bpm R: 84 bpm

Echocardiography:

A screening echocardiogram was performed
This examination emphasized cardiac chamber size, wall thicknesses, and heart function
2D echocardiographic imaging was within limits of normal and similar to his last examination
There was no evidence of congenital heart malformation or of hypertrophic cardiomyopathy
Ventricular systolic function was normal

Surgical and Therapeutic Procedures:

Screening ("CERF") examination of the heart with echocardiogram

Cardiac auscultation by a board-certified cardiologist
Echocardiogram by a board-certified cardiologist

Recommendations and Instructions:

No therapy is indicated at this time.

Prognosis:

This screening examination did not reveal any evidence of congenital or acquired heart disease.

Some disorders, such as hypertrophic cardiomyopathy (HCM) are classified as adult-onset, genetic heart diseases. These may develop later in life and for this reason the examination findings should be interpreted as "normal for this time frame".

Cats used for recurrent breeding should be re-evaluated at regular intervals (e.g., yearly) since HCM can develop later in life, even after a normal screening examination.

OSU Veterinary Hospital 601 Vernon Tharp Street Columbus, OH 43210 Phone: (614) 292-3551 Fax: (614) 292-2053	ECHOCARDIOGRAPHY REPORT - CARDIOLOGY SERVICE THE OHIO STATE UNIVERSITY VETERINARY MEDICAL CENTER Karsten Schober, DVM, DECVIM Jaylyn Rhinehart, DVM, DACVIM Randolph Winter, DVM, DACVIM Bill Clark, DVM Emily Herrold, DVM
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Patient Number: 000 448316	Species:	Sex: Male
Patient Name: Sweeney, JD	Breed: Maine Coon	Weight (kg): 12.5 kg (27.6 lbs)
Date of study: 08/06/2020	Age: 6 years	BSA: 0.54 m ²
Diagnosing Cardiologist:	Birthdate: 06/10/2014	Systolic BP:

Clinical Findings

Breeding exam.

Echocardiographic Findings

The echocardiographic examination was conducted from both the right and left sides of the thorax. Screening Exam for Feline Hypertrophic Cardiomyopathy. This examination includes subjective evaluation of long and short axis images from the parasternal (intercostal) right and left 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 performed if necessary to evaluate gallop sounds or murmurs when present.

A screening echocardiogram was requested and completed with mainly subjective evaluation of the heart to screen for hypertrophic cardiomyopathy.

There is no clear evidence of cardiomyopathy or serious structural heart disease based on subjective imaging or diastolic measures of the LV walls or septum. The left atrium is consistent with previous echo findings.

The papillary muscles appear normal.

There is no systolic anterior motion of the MV observed.

LV ejection fraction is normal.

Diagnosis & Recommendations

Normal heart for cat this size
 No evidence of HCM at this time

JDR

2D Measurements		M-Mode	Doppler Measurements		
LA Diam	20.4 mm	IVSd	2.9 mm	EA Fused	1.13 m/s
LAD Max Cat	18.8 mm	LVIDd	23.5 mm	LAapp Vmax	0.72 m/s
LVPWd LX Cat	5.17 mm	LVPWd	4.4 mm	AV Vmax	1.24 m/s
LVPWd SX Cat	4.50 mm	IVSs	5.3 mm	AV maxPG	6.11 mmHg
IVSd LX Cat	3.86 mm	LVIDs	10.2 mm		
IVSd SX Cat	3.40 mm	LVPWs	8.6 mm		
		%FS	56.77 %		

Echocardiogram Reported by: Dr. Jaylyn Rhinehart, DVM, MS, DACVIM _____