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Hypertrophic Cardiomyopathy Screening Examination Findings

PATIENT INFORMATION			
Owner/Agent Name: <u>Anna Lemus</u>		City/State: <u>Kansas City, MO</u>	Phone Number: <u>913-306-6803</u>
Cat's Call Name: <u>Smooch</u>	Cat's Registered Name: <u>Forestbell Pineapple Smoothie</u>	Cat's Registration Number/Registry: <u>SBT07122036</u>	Breed: <u>Maine Coon</u>
Date of Birth: <u>7/11/2022</u>	Gender: ☒ Male ☐ Female ☐ Intact ☐ Altered	Sire's Registration Number/Registry: <u>SBT061021107</u>	Dam's Registration Number/Registry: <u>SBT111716077</u>
I certify that I am the owner of or agent for this cat, and that the cat presented for examination is the cat described above.			
Owner/agent signature: <u>[Signature]</u>		Date: <u>7/15/2023</u>	
VETERINARIAN INFORMATION			
Name: Justin D Thomason, DVM, DACVIM (Cardiology and SAIM)		Date of Examination: July 15, 2023	Equipment Make/Model: GE Vivid IQ
PHYSICAL EXAMINATION			
Heart Rate: <u>130</u> bpm			
Auscultation (circle one): Rhythm: <u>Regular</u> Irregular			
Murmur: Grade: I II III IV V VI <u>NONE</u>			
Location: Left Parasternal Right Parasternal Both Right & Left Parasternal Right Cranioventral			
[] Other, describe:			
ECHOCARDIOGRAM			
[X] M-mode [] 2D		IVSs: <u>9.0</u> mm	
IVSd: <u>4.6</u> mm		LVIDs: <u>6.9</u> mm	Ao: <u>10</u> mm
LVIDd: <u>17.2</u> mm		LVFWs: <u>8.2</u> mm	LA: <u>14.1</u> mm
LVFWd: <u>4.5</u> mm		SF: <u>60</u> %	LA/Ao: <u>1.4</u> mm
Subjective Left Atrial Size: ☒ Normal [] Mild Enlargement [] Moderate Enlargement [] Severe Enlargement			
Systolic anterior motion of the mitral valve: [] Yes ☒ No If yes, LV outflow tract velocity (Doppler): _____			
End-systolic cavity obliteration: [] Yes ☒ No			
Papillary muscles: ☒ Normal [] Abnormal, moderate enlargement [] Abnormal, severe enlargement			
Comments:			
ASSESSMENT/DIAGNOSIS			
☒ Normal (A normal examination today does not mean that HCM will not develop in the future.)			
[] Equivocal (findings suspicious of mild or early HCM)			
[] HCM: [] Mild [] Moderate [] Severe			
Comments:			
RECOMMENDATIONS			
Recheck Examination: <u>None</u> <u>6 months</u> ☒ 1 year <u>2 years</u>			
Comments:			
Veterinarian Signature: <u>[Signature]</u>		Area of Specialty: Cardiology	Date: July 15, 2023