

Hypertrophic Cardiomyopathy Screening Examination Findings

PATIENT INFORMATION			
Owner/agent name <u>Alexa Rodriguez</u>		City/State <u>Tryon, NC</u>	
Cat's registered name/number <u>SBT 052223 025</u>		Breed <u>Bengal</u>	
Cat's registration number/registry name <u>Bougie Bengais Luminosa Sot "Lumi"</u>		Date of birth <u>5/22/23</u>	
Sire's registration number/registry <u>SBT 040118 040</u>		Dam's registration number/registry <u>SBT 04020 048</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: <u>A. Rodriguez</u>		Date: <u>7/7/25</u>	
VETERINARIAN INFORMATION			
Name <u>Margaret Sayer</u>		Date of examination <u>7/7/25</u>	
Address <u>3726 Latrobe Dr. Charlotte NC 28211</u>		Equipment make/model <u>Philips Epiq 7C</u>	
		Phone number <u>704-457-2300</u>	
PHYSICAL EXAMINATION			
Weight: <u>3.4</u> ☐ lb ☒ kg		Auscultation:	
Heart rate: <u>190</u> bpm		☒ Normal	
☐ Dehydrated ☐ Pregnant ☐ Lactating		☐ Gallop	
☐ Other; describe:		☐ Murmur. Characteristics:	
		Grade: I II III IV V VI ☐ Dynamic ☐ Static	
		Timing: ☐ Systolic ☐ Diastolic ☐ Both ☐ Continuous	
		Location: ☐ Left apex (sternum) ☐ Left base	
		☐ Other; describe:	
Comments:			
ECHOCARDIOGRAM			
IVSd <u>4.99</u> ☐ cm ☒ mm		Subjective left atrial size:	
LVIDd <u>11.6</u>		☒ Normal	
LVFWd <u>5.74</u>		☐ Mild enlargement	
IVSs <u>0.809</u>		☐ Moderate enlargement	
LVIDs <u>5.6</u>		☐ Severe enlargement	
LVFWs <u>7.99</u>		Systolic anterior motion of the mitral valve: ☐ Yes ☒ No	
SF <u>51.7%</u>		If yes, LV outflow tract flow velocity (Doppler):	
Ao <u>0.8</u>		End-systolic cavity obliteration: ☐ Yes ☒ No	
LA <u>1.0</u>		Papillary muscles:	
LA/Ao <u>1.25</u>		☒ 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.)		Comments:	
☐ Equivocal			
☐ Findings suspicious of mild or early HCM			
☐ HCM: ☐ Mild ☐ Moderate ☐ Severe			
RECOMMENDATIONS			
Recheck examination: ☐ None ☐ 6 months ☐ 1 year ☒ 2 years			
Comments:			
Veterinarian's signature <u>Margaret Sayer</u>		Area of specialty <u>Cardio</u>	
		Date <u>7-7-25</u>	