



HCM/RCM screening within health programme

Participating clubs: see <http://www.pawpeds.com/healthprogrammes/hcmclubs.html>
 Visit <http://www.pawpeds.com/healthprogrammes/> for more information

Patient Information		Owner's name Boris Ehret
Cat's registered name Spice Lemon Grass		Address Kneubühl 3
Registration number SBT 080415 015		Post code/City/State 6208 Oberkirch
ID number, microchip or tattoo 756093900020590		Country Switzerland
Breed of cat Bengal		Phone (including country code) +41 79 293 86 75
<input type="checkbox"/> Male <input checked="" type="checkbox"/> Not altered <input checked="" type="checkbox"/> Female <input type="checkbox"/> Altered		Email b.ehret@bluewin.ch
Born (year-month-day) 04 August 2015		I have read PawPeds' instructions for HCM screening and are aware that I must inform the examiner about my cats health status and if it is on medication. I am aware that the results will be retained for the records of PawPeds. I authorize PawPeds to publicly release all results from this form. Signature _____ Date 2022-10-26
Sire IW SGC Fraser Valley Denalis Thunder		
Dam RW TGC Spice Sucette à l'Anis		
Examination		Examination date (year-month-day) 2022-10-26
Sedated <input type="checkbox"/> Yes, with: _____ <input checked="" type="checkbox"/> No		Examination equipment Vivid iq
On medication <input type="checkbox"/> Yes, with: _____ <input checked="" type="checkbox"/> No		
Weight <u>3.8</u> kg BCS <u>4</u>	Auscultation: <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Gallop <input type="checkbox"/> Murmur, characteristics Grade: I II III IV V VI <input type="checkbox"/> Dynamic <input type="checkbox"/> Static Timing: <input type="checkbox"/> Systolic <input type="checkbox"/> Diastolic <input type="checkbox"/> Both <input type="checkbox"/> Continuous Location: <input type="checkbox"/> Left apex (sternum) <input type="checkbox"/> Left Base <input type="checkbox"/> Other, describe	
Heart rate <u>168</u> bpm	<input type="checkbox"/> Dehydrated <input type="checkbox"/> Pregnant <input type="checkbox"/> Lactating <input type="checkbox"/> Other, describe	
ECG Heart Frequency <u>182</u>	Subjective left atrial size <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Mild enlargement <input type="checkbox"/> Moderate enlargement <input type="checkbox"/> Severe enlargement Systolic anterior motion of the mitral valve <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, LV outflow tract flow velocity (Doppler) _____ End-systolic cavity obliteration <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Papillary muscles <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Abnormal, moderate enlargement <input type="checkbox"/> Abnormal, severe enlargement	
IVSd <u>4.2</u> <input type="checkbox"/> cm <input checked="" type="checkbox"/> mm	<input type="checkbox"/> M-mode <input type="checkbox"/> 2-D	
LVIDd <u>15.8</u>	<input type="checkbox"/> M-mode <input type="checkbox"/> 2-D	
LVFWd <u>4.1</u>	<input type="checkbox"/> M-mode <input type="checkbox"/> 2-D	
IVSs <u>6.9</u>	<input type="checkbox"/> M-mode <input checked="" type="checkbox"/> 2-D	
LVIDs <u>3.2</u>	<input type="checkbox"/> M-mode <input type="checkbox"/> 2-D	
LVFWs <u>6.6</u>	<input type="checkbox"/> M-mode <input type="checkbox"/> 2-D	
SF <u>42%</u>		
Ao <u>3.0</u>	<input type="checkbox"/> M-mode <input type="checkbox"/> 2-D	
LA <u>11.4</u>	<input type="checkbox"/> M-mode <input type="checkbox"/> 2-D	
LA/Ao <u>1.28</u>		
Assessment (based on phenotype)		Comments Normal cardiac function and dimensions.
<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Equivocal <input type="checkbox"/> HCM <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/> RCM <input type="checkbox"/> Other, describe		
PawPeds' examination instructions has been followed Cat's identity verified <input checked="" type="checkbox"/> yes <input type="checkbox"/> no, describe why not Veterinary's signature _____ Date 2022-10-26		Veterinarian's name, clinic's name and address KardioVet