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

Cat's registered name: Imeros de Leinoya

Registration number: LOOF 2013.15494

ID number, microchip or tattoo: 250269810120864

Breed of cat: Norwegian Forest Cat

☒ Male ☐ Not altered
☐ Female ☐ Altered

Born (year-month-day): 2013-06-06

Sire: SC Socrates Harmony Verte

Dam: SC Darline du Soleil de Minuit

Owner

Owner's name: Virginie Jost

Address: 3 rue de Normandie

Post code/City/State: FR-68600 Obersaasheim

Country: France

Phone (including country code): +33 6 81 10 08 69

Email: jost-h@wanadoo.fr

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** 09/06/14

Examination

Examination date (year-month-day): 2014-06-10

Sedated: ☐ Yes, with: ☒ No

Examination equipment: Aloka pro sound α

On medication: ☐ Yes, with: ☒ No

Weight: 4,7 kg

Heart rate: 140 bpm

☐ Dehydrated ☐ Pregnant
☐ Lactating ☐ Other, describe

Auscultation:
☒ Normal ☐ Gallop
☐ Murmur, characteristics
Grade: I II III IV V VI ☐ Dynamic ☐ Static
Timing: ☐ Systolic ☐ Diastolic ☐ Both ☐ Continuous
Location: ☐ Left apex (sternum) ☐ Left Base ☐ Other, describe

IVSd	4,1	☐ cm ☒ mm	☒ M-mode	☐ 2-D
LVIDd	17,6		☒ M-mode	☐ 2-D
LVFWd	4,1		☒ M-mode	☐ 2-D
IVSs	9,8		☒ M-mode	☐ 2-D
LVIDs	7,6		☒ M-mode	☐ 2-D
LVFWs	10,0		☒ M-mode	☐ 2-D
SF	56,7 %			
Ao	9,2		☐ M-mode	☒ 2-D
LA	9,5		☐ M-mode	☒ 2-D
LA/Ao	1,03			

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 flow velocity (Doppler) _____

End-systolic cavity obliteration ☐ yes ☒ no

Papillary muscles
☒ Normal
☐ Abnormal, moderate enlargement
☐ Abnormal, severe enlargement

Assessment (based on phenotype)

☒ Normal ☐ Equivocal
☐ HCM ☐ Mild ☐ Moderate ☐ Severe
☐ RCM
☐ Other, describe

Comments

Veterinarian

PawPeds' examination instructions has been followed
Cat's identity verified ☒ yes ☐ no, describe why not

Signature **Date**
Alan Kovacevic 10.6.2014

Veterinarian's name, clinic's name and address
ALAN KOVACEVIC
UNIVERSITY BERN
LÄNGGASSSTRASSE 120
CH 3012 BERN SWISS

For registration of the result, the veterinarian shall send a copy of this form to:
PawPeds, c/o Olsson, Ängsmyrvägen 1 Bäsna, SE-781 95 BORLÄNGE, Sweden