HCM screening within health programme

Participating clubs: Maine Coon-katten, Sällskapet Sibirisk Katt, Skogkattslingan, Rex United, Skogkattklubben Birka, Rasclub Maine Coon, Scandinavian Ragdoll Club, Birmasällskapet, SWEPEX (Svenska Perser & Exoticringen)

Visit http://www.pawpeds.com/healthprogrammes/ for more information

Patient Information

Cat's registered name: Cara-Mia vom Wolfsberg

Registration number: SRV 006649-1 Bd. 1-08

ID number, microchip or tattoo: 276094190030710

Race: Maine Coon

☐ Male ☒ Not altered
☒ Female ☐ Altered

Born (year-month-day): 2008-03-05

Sire: Ch. Angelo vom Wolfsberg

Dam: Agathe vom Zarenreich

Owner's name: Thomas, Renate

Address: Frankenstr. 17

Postcode/City/State: 97440 Werneck

Country: Germany

Phone (including country code): +49(0)9722-947547

Email: of-chiarandy@web.de

I am aware that the results will be retained for the records of Maine Coon-katten. I authorize Maine Coon-katten to publicly release all results from this form

Signature R. T. **Date** 17.09.10

Examination

Examination date (year-month-day): 2010-09-17

Sedated: ☐ Yes, with: ☐ No

Examination equipment: Vivid 7

Weight: 5,38 kg

Heart rate: 180 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	4,7	☐ cm	☒ mm	☒ M-mode ☐ 2-D
LVIDd	14,9			☒ M-mode ☐ 2-D
LVFWd	5,8			☒ M-mode ☐ 2-D
IVSs	8,0			☒ M-mode ☐ 2-D
LVIDs	6,2			☒ M-mode ☐ 2-D
LVFWs	9,5			☒ M-mode ☐ 2-D
SF	58,3			
Ao	11,8			☒ M-mode ☐ 2-D
LA	12,6			☒ M-mode ☐ 2-D
LA/Ao	1,1			

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
☐ Other, describe

Comments: mild tricuspidinsufficiency

Veterinarian

Cat's identity verified ☒ yes ☐ no, describe why not

Signature **Date** 17.09.2010

Vetenarian's name, clinic's name and address

Dr. med. vet. Ingo Schneider
Fachtierarzt für Klein u. Heimtiere
Kardiologie
61130 Nidderau - Heldenbergen
Bahnhofstrasse 19
Tel. 06187/292112 Fax 06187/292113

For registration of the result, the veterinarian shall send a copy of this form to:
Maine Coon-katten, c/o Anne N. Jensen, Landsvinget 5, Nejede, 3400 Hillerød, Denmark

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