

**Certificate of cardiovascular examination**

**Cat**

Breed <b>Siberian</b>	Date of birth 01/11/2017	Color NS 2409
Name <b>Marmelad Velesbeast</b>	male <input checked="" type="checkbox"/>	female <input type="checkbox"/>
№ Pedigree <b>KTG-EPK/011117/038-SIB</b>		
ID-number/tattoo	ID/tattoo checked	
Owner <b>Kalenova O.</b>		
Address		
Zip code and area		
Signature of the owner		

Previous examination Yes  No

1.  Ausc.:Murmur  No  Yes  Sysol ...../6 Diastol. .... /6  
 HR...../min Pulse...../min Other findings .....

2.  Echocardiography: Short axis view  Long axis view  HR 186/min  
 IVSd: 4,0 mm IVS: 6,1 mm FS: 48 % LAs: 9,6 mm Aod: 8,3 mm LA/Ao: 1,15  
 LVDd: 14,3 mm LVDs: 7,5 mm LVWd: 4,0 mm LVWs: 5,9 mm  
 RAs: 8,5 mm RVDd: 5,5 mm Pap.Musc **Not Changed**  
 AV: 1,3 m/sek  
 PV: 0,9 m/sek

**Result**

<p><b>Congenital</b></p> <table style="width:100%;"> <tr> <td style="width:30%;"></td> <td style="width:35%;">AS</td> <td style="width:35%;">PS</td> </tr> <tr> <td>Free</td> <td><input checked="" type="checkbox"/> 0</td> <td><input checked="" type="checkbox"/> 0</td> </tr> <tr> <td>Susp.</td> <td><input type="checkbox"/> 1(2,0-2,25m/s)</td> <td><input type="checkbox"/> 1(1,8-2,25m/s)</td> </tr> <tr> <td>Mild</td> <td><input type="checkbox"/> 2(2,25-3,5m/s)</td> <td><input type="checkbox"/> 2(2,25-3,5m/s)</td> </tr> <tr> <td>Mod</td> <td><input type="checkbox"/> 3(3,5-4,5m/s)</td> <td><input type="checkbox"/> 3(3,5-4,5m/s)</td> </tr> <tr> <td>Severe</td> <td><input type="checkbox"/> 4(&gt;4,5m/s)</td> <td><input type="checkbox"/> 4(&gt;4,5m/s)</td> </tr> <tr> <td>Subvalvular</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Valvular</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Other findings.....</td> </tr> </table>		AS	PS	Free	<input checked="" type="checkbox"/> 0	<input checked="" type="checkbox"/> 0	Susp.	<input type="checkbox"/> 1(2,0-2,25m/s)	<input type="checkbox"/> 1(1,8-2,25m/s)	Mild	<input type="checkbox"/> 2(2,25-3,5m/s)	<input type="checkbox"/> 2(2,25-3,5m/s)	Mod	<input type="checkbox"/> 3(3,5-4,5m/s)	<input type="checkbox"/> 3(3,5-4,5m/s)	Severe	<input type="checkbox"/> 4(>4,5m/s)	<input type="checkbox"/> 4(>4,5m/s)	Subvalvular	<input type="checkbox"/>	<input type="checkbox"/>	Valvular	<input type="checkbox"/>	<input type="checkbox"/>	Other findings.....			<p><b>Acquired</b></p> <p>Cardiomyopathies</p> <p>HCM</p> <p>HCM no signs <input checked="" type="checkbox"/> 0</p> <p>HCM equivocal <input type="checkbox"/> 1</p> <p>HCM occult <input type="checkbox"/> 2</p> <p>HCM overt <input type="checkbox"/> 3</p> <p>Valvular disease: none <input checked="" type="checkbox"/> 0</p> <p>DVD Mitral <input type="checkbox"/> Tricusp <input type="checkbox"/> mild <input type="checkbox"/> 1</p> <p>DVD Mitral <input type="checkbox"/> Tricusp <input type="checkbox"/> mod.2 <input type="checkbox"/></p> <p>DVD Mitral <input type="checkbox"/> Tricusp <input type="checkbox"/> severe <input type="checkbox"/> 3</p> <p>Other findings.....</p>
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<p><b>Conclusion</b></p> <p>None or minimal cardiovascular changes <input checked="" type="checkbox"/> 0</p> <p>Mild cardiovascular changes <input type="checkbox"/> 1</p> <p>Moderate cardiovascular changes 2 <input type="checkbox"/></p> <p>Severe cardiovascular changes <input type="checkbox"/> 3</p>																												

Date 12.12.2018

Examiner..... *В.Шей*

