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: S*Tunsji's Sol Milovna

Registration number: LO 352213

ID number, microchip or tattoo:

Breed of cat: Siberian

☐ Male ☐ Not altered
☒ Female ☒ Altered

Born (year-month-day): 2018-04-28

Sire: Milo-Maksim iz Primorskij(D)

Dam: S*Tunsji's Hermione Umbertovna

Owner's name:

Address:

Post code/City/State:

Country:

Phone (including country code):

Email:

I have read PawPeds' instructions for HCM screening. I am 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 by PawPeds and that they will handle my personal data. I authorize PawPeds to publicly release the results from this form.

Signature **Date** 19/11-25

Examination

Examination date (year-month-day): 2025 11 19

Sedated: ☐ Yes, with: ☒ No

Examination equipment: Mindray P10 + M43

On medication: ☐ Yes, with: ☒ No

Weight 3.2 kg BCS 5

Heart rate 174 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

ECG Heart Frequency /

IVSd	0.39	☒ cm ☐ mm	☐ M-mode	☒ 2-D
LVIDd	1.11		☒ M-mode	☐ 2-D
LVFWd	0.41		☐ M-mode	☒ 2-D
IVSs	0.71		☒ M-mode	☐ 2-D
LVIDs	0.59		☒ M-mode	☐ 2-D
LVFWs	0.58		☒ M-mode	☐ 2-D
SF	46			
Ao	0.84		☐ M-mode	☒ 2-D
LA	0.96		☐ M-mode	☒ 2-D
LA/Ao	1.15			

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

Anna Rave Vestberg
LEG.VETERINÄR
Specialist i kardiologi

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

Veterinary's signature **Date** 25/11/19

Veterinarian's name, clinic's name and address

Hammarö Smådjursklinik AB
Nolgårdsvägen 39
663 41 Hammarö, Sweden
054-45 40 640

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