VETERINARY CARDIAC SERVICES
AUSTRALIA

Certificate of Echocardiography

This is to certify that I, Dr Geoff Nicolson BVSc (Hons I) MVETSTUD Dipl. ECVIM-CA (Cardiology), a qualified **Specialist Veterinary Cardiologist**, have today 23-09-22 examined the following animal for evidence of cardiac disease:

Animal Name: COONHEART MAGDA

Age/DOB: 20-08-21 **Sex:** Female **Breed:** Maine Coon

Colour: Black Silver Tortie Classic Tabby & White **Reg no:** [redacted] **Microchip no:** [redacted]

Owner: Shireen Boovse [redacted]

Address: [redacted]

I hereby declare that the animal submitted for examination is the animal described above. Furthermore, I declare I am the owner or agent of the animal.

Signed: Owner/Agent _____ Date: _____

Echocardiographic Examination
(cardiologist to complete)

Findings: Normal cardiac structure and function. No evidence of HCM or other cardiac disease.

LVIDd 18.6 mm LVIDs 10.8 mm FS 42 %

IVSd 2.8 mm LVFWd 2.9 mm LA:Ao 14.0:8.2 mm (norm. < 1.6)

Aortic velocity 1.20 m/s (norm. < 2m/s) Pulmonic velocity 1.60 m/s (norm. < 2m/s)

MR velocity N/A m/s (norm. 5-6m/s) TR velocity N/A m/s (norm. < 3.0m/s)

Certification Statement
(cardiologist to complete)

The above animal has no echocardiographic evidence of cardiac disease. Fit for breeding.

Annual screening advised.

1) The above animal has no echocardiographic evidence of cardiac disease
2) The above animal has echocardiographic changes, which I consider to be of no significance with regards to breeding
3) The above animal has an echocardiographic abnormality, which I consider makes it unsuitable for breeding purposes

Dr Geoff Nicolson
BVSc (Hons I) MVETSTUD Dipl. ECVIM-CA (Cardiology)
Specialist Veterinary Cardiologist