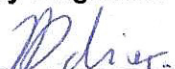




HCM/RCM screening within health programme
Participating clubs: see <http://www.pawpeds.com/healthprogrammes/hcmclubs.html>
Visit <http://www.pawpeds.com/healthprogrammes/> for more information

Patient Information		Owner's name
Cat's registered name BINEDOLLS LIAM		CHARMILLOT JESSICA
Registration number (FR) FFF LO 5349		Address VOISINAGE 13
ID number, microchip or tattoo 276 095 610 849 567		Post code/City/State 2316 LES PONTS-DE-MARTEL
Breed of cat RAGDOLL		Country SUISSE
☒ Male ☐ Not altered ☐ Female ☐ Altered		Phone (including country code) 0041 32 939 14 12
Born (year-month-day) 11 avril 2021		Email INFO@TRYCOLINES.COM
Sire BINEDOLLS SASUKE		I have read PawPeds' instructions for HCM screening. I am aware that I must inform the examiner about my cat's 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 04.10.22
Dam BINEDOLLS ISIS		
Examination		Examination date (year-month-day) 2022-10-04
Sedated ☐ Yes, with: ☒ No		Examination equipment Vivid T0
On medication ☐ Yes, with: ☒ No		
Weight 6.13 kg BCS 5.5/9 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
ECG Heart Frequency 130 IVSd 3.3 cm ☐ mm ☒ M-mode ☐ 2-D LVIDd 18.8 ☒ M-mode ☐ 2-D LVFWd 4.44 ☒ M-mode ☐ 2-D IVSs 6 ☒ M-mode ☐ 2-D LVIDs 10.8 ☒ M-mode ☐ 2-D LVFWs 7.1 ☒ M-mode ☐ 2-D SF 43.1 Ao 10.2 ☐ M-mode ☒ 2-D LA 14.5 ☐ M-mode ☒ 2-D LA/Ao 1.4		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 Recheck in 12 months
PawPeds' examination instructions has been followed Cat's identity verified ☐ yes ☐ no, describe why not Veterinary's signature  Date 4/10/22		
		Veterinarian's name, clinic's name and address Josephine Dandrieux Dr. Josephine Dandrieux CardioVet Focus, +41 78 401 25 71 jodandrieux@cardiovetfocus.ch

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