INSTITUTE of VETERINARY SPECIALISTS

5609 SW 64th Street ◎ Gainesville, Florida 32608
352-331-4233 ◎ 352-335-9328 (fax)

Patient:
Governor Caywood
Maine Coon
388409
DOB: 11/30/21 4 years
M
7.82 kg

Referring Veterinarian:
Shoreline Veterinary Hospital^^^

shorelinepetvet@gmail.com

Dr. Courtney Wagner
1028 South 3rd Street
Jacksonville Beach, FL 32250
904-249-8277

Date: Jan 12, 2026

Dear Dr. Wagner,

Thank you for requesting evaluation of Governor Caywood at your clinic. Governor Caywood was evaluated on January 12, 2026. The pertinent facts of the case are:

History:

New Mobile Cardiology Consultation - Drop Off

History: Governor presented for a routine examination. There are no clinical signs of heart disease at this time.

Current Medications: None

Examination & Diagnostic Testing:

Physical Examination (Cardiac Specific)

Physical examination demonstrated no cardiac murmur. A heart rate of 200 beats per minute was obtained and femoral pulses were within normal limits. Respiratory rate and character were within normal limits (30-40 bpm).

Echocardiography

Echocardiography demonstrated left ventricular wall and chamber dimensions as well as left atrial dimensions to be within normal limits (left ventricular dimensions at upper limit of normal likely secondary to nody weight / breed of patient). Right side chambers and valves were within normal limits. There were no heartworms noted in visible portions of the pulmonary arteries. Color Doppler and pulsed-wave Doppler echocardiography demonstrated no turbulent flow.

Assessment:

There is no echocardiographic evidence of clinically significant heart disease.

Recommendations:

Further Diagnostic Tests: N/A

Medications: There is no indication for cardiac medications at this time.

Diet: A standard diet should be provided.

Exercise: Normal activity may be allowed.

Recheck/Comments:

Routine screenings as needed may be provided.

Anesthesia: I see no echocardiographic contraindication for anesthesia if needed at this time.

Additional Notes: Recheck echocardiography may be considered yearly to every other year to rule out cardiomyopathy in this breed.

We appreciate your referral and please do not hesitate to call if there are any questions regarding this case.

Sincerely,
Davin J Borde, DVM, DACVIM (Cardiology)

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P: (352) 331-4233

This report is based solely on information supplied by the primary care facility. Please contact us if the report is not in accord with the information you have on file, or if it does not appear to adhere to generally accepted medical practice. IVS assumes no responsibility for the archival of submitted diagnostics.

Name **caywood, govenor**
Patient Id **388409**
Date **01/12/2026**

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2D	
LVLd A4C	3.9 cm
LVEDV MOD A4C	7 ml
LVLs A4C	3.4 cm
LVESV MOD A4C	1 ml
LVEF MOD A4C	89 %
SV MOD A4C	6 ml
Ao Diam	10.11 mm
LA Diam	14.84 mm
LA/Ao	1.47

M-Mode	
IVSd	5.24 mm
LVIDd	18.55 mm
LVPWd	5.27 mm
IVSs	7.53 mm
LVIDs	10.29 mm
LVPWs	8.75 mm
EDV(Teich)	11 ml
ESV(Teich)	2 ml
EF(Teich)	79 %
%FS	45 %
SV(Teich)	8 ml

Doppler	
LVOT Vmax	1.15 m/s
LVOT maxPG	5.30 mmHg
AV Vmax	1.30 m/s
AV Vmean	0.80 m/s
AV maxPG	6.74 mmHg
AV meanPG	3.01 mmHg
AV Env.Ti	137 ms
AV VTI	10.9 cm
HR	193 BPM
RVOT Vmax	0.73 m/s
RVOT maxPG	2.15 mmHg
PV Vmax	0.89 m/s
PV maxPG	3.20 mmHg