**Clinical details**

${age} ${gender} ({reason}).

*Protocol*: ({protocol})

*Quality*: Adequate

**Findings**

*Lungs and mediastinum*: No significant extra-cardiac abnormalities. Normal cardiac arterial and venous connections. [ 1) Normal aortic root size 2) dilated aortic root size ] (annulus (XX) mm, sinus (XX) mm, sinotubular junction (XX) mm). [ 1) Normal ascending aorta size 2) dilated ascending aorta size ] (main pulmonary artery level (XX by XX) mm). No pericardial effusion present.

*Left ventricle*: The left ventricle [ 1) is of normal size 2) is small 3) is dilated ] according to indexed volume, with [ 1) normal myocardial mass 2) eccentric hypertrophy 3) concentric hypertrophy 4) reduced myocardial mass ] (max wall thickness (XX) mm). There is [ 1) good global systolic function 2) overall mildly reduced global systolic function 3) overall moderately reduced global systolic function 4) overall severely reduced global systolic function 5) hyperdynamic systolic function].

*Left ventricle*: The left ventricle is of {lvedvi\_status} according to indexed volume, with {lvmi\_status} (max wall thickness (XX) mm). There is {lvef\_status}.

*Right ventricle*: The right ventricle [ 1) is of normal size 2) is dilated 3) is small ] according to indexed volume. There is [ 1) good global systolic function 2) impaired systolic function ].

*Right ventricle*: The right ventricle {rvedvi\_status} according to indexed volume. There is {rvef\_status}.

*Atria*: Left atrium is [ 1) of normal size 2) dilated ] according to indexed volume [XX ml; XX ml/m2; XX mm diameter]. Right atrium is [ 1) of normal size 2) dilated ] according to indexed volume (XX cm2; XX ml; XX ml/m2).

*Atria*: Left atrium is {lavi\_status} according to indexed volume [{lav}ml; {lavi}ml/m2; {lad}mm diameter]. Right atrium is {rav\_status} according to indexed volume ({raArea}cm2; {rav} ml; {ravi} ml/m2).

*Valves*:

Aortic valve is [ 1) trileaflet with good leaflet excursion. 2) trileaflet with reduced leaflet excursion ]. There is [ 1) no aortic stenosis 2) mild aortic stenosis 3) moderate aortic stenosis 4) severe aortic stenosis ]; (peak flow velocity of XX cm/s]. There is [ 1) no aortic regurgitation 2) aortic regurgitation] (phase flow AR severity XX ml; regurgitant fraction XX %).

Mitral valve leaflets are thin with good excursion. There is [ 1) no mitral regurgitation 2) mild mitral regurgitation 3) moderate mitral regurgitation 4) severe mitral regurgitation ]. [Mitral regurgitant volume is XX ml; regurgitant fraction XX %].

Tricuspid valve leaflets are thin with good excursion; there is no tricuspid regurgitation.

*Resting first pass perfusion imaging*: no evidence of hypoperfusion.

*Early gadolinium imaging*: no intra-cardiac masses noted.

*Late gadolinium imaging*: [ 1) No myocardial fibrosis 2) Myocardial fibrosis present as detailed below ].

*T1 mapping*:

Native base: myocardial T1 {preMyo}ms, blood pool {preBlood} ms.

Post-contrast base: myocardial T1 {postMyo}ms, blood pool {postBlood}ms.

Native mid: myocardial T1 {preMyo}ms, blood pool {preBlood}ms.

Post-contrast mid: myocardial T1 {postMyo}ms, blood pool {postBlood}ms.

ECV is{ecv\_status} (XX)%, based on haematocrit of {ecv}.

*T2*: no evidence of myocardial oedema.

*Quantitative data summary*: Height {height}cm, weight {weight} kg, BSA {bsa} m2

LVEDV: {lvedv} ml [{lvedv\_min} – lvedv\_max} ml]

LVEDVi: {lvedvi} ml/m2 [{lvedvi\_min} – lvedvi\_max} ml/m2]

LVESV: {lvesv} ml [{lvesv\_min} – lvesv\_max} ml]

LVESVi: {lvesvi}ml/m2 [{lvesvi\_min} – lvesvi\_max} ml/m2]

LVSV: {lvsv}ml [{lvsv\_min} – lvsv\_max} ml]

LVEF: {lvef} % [{lvef\_min} – lvef\_max} %]

LVM: {lvm}g [{lvm\_min} – lvm\_max} g]

LVMi: {lvmi} g/m2 [{lvmi\_min} – {lvm\_max}g/m2]

Ascending aortic forward volume: XX ml

RVEDV: {rvedv}ml [{rvedv\_min} – rvedv\_max} ml]

RVEDVi: {rvedvi} ml/m2 [{rvedvi\_min} – rvedvi\_max} ml/m2]

RVSV: {rvsv}ml [{rvsv\_min} – rvsv\_max} ml]

RVESV: {rvesv} ml [{rvesv\_min} – rvesv\_max} ml]

RVESVi: {rvesvi}ml/m2 [{rvesvi\_min} – rvesvi\_max} ml/m2]

RVEF: {rvef} % [{rvef\_min} – rvef\_max} %]

*Viability assessment mapped to the 16-segment left ventricular segmentation model*

*Wall motion score*: 0 = normal, 1 = mildly hypokinetic, 2 = severe hypokinetic, 3 = akinetic, 4 = dyskinetic, 5 = aneurysmal.

*Scoring for the transmural extent of LGE*: 0 = 0%, 1 = 1-25%, 2 = 26-50%, 3 = 51-75%, 4 = 76-100%.

**Basal                   Wall Motion**          **Scar** Anterior                          {wallMotion1}               {scar1}

Anterolateral                           {wallMotion2}               {scar2}

Inferolateral                                   {wallMotion3}               {scar3}

Inferior                                     {wallMotion4}               {scar4}

Inferoseptal                                      {wallMotion5}               {scar5}

Anteroseptal                                  {wallMotion6}               {scar6}

**Mid Wall Motion**          **Scar** Anterior                          {wallMotion7}               {scar7}

Anterolateral                           {wallMotion8}               {scar8}

Inferolateral                                   {wallMotion9}               {scar9}

Inferior                                     {wallMotion10}             {scar10}

Inferoseptal                                      {wallMotion11}              {scar11}

Anteroseptal                                  {wallMotion12}              {scar12}

**Apex Wall Motion**          **Scar** Anterior                          {wallMotion13}               {scar13}

Lateral                                  {wallMotion14}               {scar14}

Inferior                                     {wallMotion15}               {scar15}

Septal                                      {wallMotion16}               {scar16}

**Conclusions:** {conclusion}

**Comment:** {comment}

Reported by Dr {firstName} {lastName}, {title}