


Transthoracic echo (TTE) limited with limited Doppler and color

Name:	[REDACTED]	Date of Study:	12/28/22
MRN:	20448053	Ordering:	[REDACTED]
DOB:	[REDACTED] 69 y.o.)	Indications:	Valvular disease
Gender Identity:	Male		
Height:	1.753 m (5' 9")		
Weight:	107 kg (235 lb)		
BSA:	2.22 m ²		
BP:	158/82		

Interpreting Physicians

Performing Staff

 **Transthoracic echo (TTE) limited with or without micro-bubble contrast as needed per protocol: Patient Communication**

 Released

 Seen

Cardiac Procedural History

Past Surgical History

	Laterality	Date	Comments
Coronary angiography with LV and right heart	N/A	9/2/2021	[REDACTED]
Coronary angiography with LV	N/A	11/25/2022	
Replacement Transcatheter Aortic Valve Endovascular (TAVR) with TEE	N/A	12/28/2022	
Coronary angiography with LV	N/A	8/3/2023	
Percutaneous coronary intervention (PCI)	N/A	8/3/2023	

Interpretation Summary

- Limited echo for peri-procedural guidance for Transcatheter aortic valve replacement (TAVR)
- At baseline there is severe aortic stenosis and no aortic insufficiency. The LV systolic function is normal
- After deployment of 29 mm Evolut Fx Transcatheter Heart Valve (THV), no mechanical complications are noted. The valve is well seated and well positioned. The LV function remains unchanged. The gradients are as expected for the valve type. There is trace paravalvular aortic insufficiency.

Study Details

Echo An echo was performed using limited 2D, color flow Doppler and spectral Doppler. Overall the study quality was fair. The study had technical difficulties. The study was difficult due to patient's positioning.

Myocardial Findings

Left Ventricle Systolic function is normal with an ejection fraction of 60-65%. Wall motion is normal.

Wall Motion The left ventricular wall motion is normal.

Aortic Valve There is a TAVR bioprosthetic valve. The prosthetic valve appears well-seated and appears to be functioning normally. There is trace paravalvular regurgitation.

TAVR Intra-Op Echo Measurements

Pre Valve Deployment:

? EF :	60-65 %
? LVOT diameter	1.9 cm
? Annulus diameter	3.3 cm x 2.9 cm
? Ao Sinus	3.3 cm
? ST Junction	2.9 cm
? Ascending Ao	3.6 cm
? Peak AoV velocity	364 cm/s
? Peak AoV gradient	53 mmHg
? Mean AoV gradient	30 mmHg
? AVA	0.7 cm ²
? AI severity	None
? MR severity	None

Post Valve Deployment:

? EF :	50-55 %
? There is a using 29mm Evolut Fx transcatheter heart valve in the aortic position with normal appearing fxn	
? Peak AoV velocity	100 cm/s
? Peak AoV gradient	4 mmHg
? Mean AoV gradient	2 mmHg
? AVA	2.8 cm ²
? Central AI severity	None
? Paravalvular AI severity	Trace
? MR severity	None
? Pericardial effusion	None

2D Measurements

Volumes	Aortic Root - End
LVOT 68.86 cm ³	Diastolic
stroke volume	Ao- 3.3 cm
	sinuses
	Ao-st 2.9 cm
	junc
	Ao-asc 3.6 cm

Doppler Measurements - Aortic Valve

LVOT diameter 1.9 cm	AV LVOT 3 mmHg
LVOT area 2.83 cm ²	peak
LVOT peak vel 0.91 m/s	gradient
LVOT peak VTI 24.3 cm	
AV peak vel 1 m/s	
AV VTI 24.7 cm	
AV VTI ratio 0.98	
AV area 1.1 cm ²	
AV area index 0.5 cm ² /m ²	
AV mean gradient 2 mmHg	
AV peak gradient 21 mmHg	

AV velocity ratio	0.91
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Doppler Measurements - Left Ventricular Outflow Tract

AV LVOT peak gradient

3 mmHg

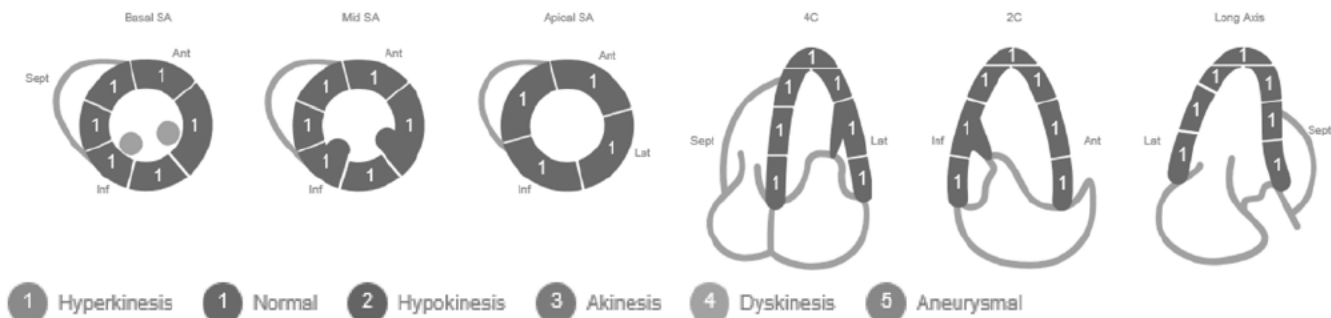
Doppler Measurements - Shunt Ratio

LVOT stroke volume

68.86 cm³

Wall Motion

Score Index: 1.00



PACS Images

(Link Unavailable) Show images for Transthoracic echo (TTE) limited with or without micro-bubble contrast as needed per protocol

Encounter-Level Documents on 12/28/2022:

- After Visit Summary - Document on 12/29/2022 12:26 PM: IP AVS - Discharge to Home
- After Visit Summary - Document on 12/29/2022 12:26 PM: IP AVS - Discharge to Home
- After Visit Summary - Document on 12/29/2022 12:23 PM: IP AVS - Discharge to Home
- After Visit Summary - Document on 12/29/2022 12:22 PM: IP AVS - Discharge to Home
- After Visit Summary - Document on 12/29/2022 11:56 AM: IP AVS - Discharge to Home
- After Visit Summary - Document on 12/29/2022 11:56 AM: IP AVS - Discharge to Home
- After Visit Summary - Document on 12/29/2022 11:55 AM: IP AVS - Discharge to Home
- After Visit Summary - Document on 12/29/2022 11:55 AM: IP AVS - Discharge to Home
- > EKG - Scan on 12/29/2022
- > EKG - Scan on 12/29/2022
- > Operative Room Record - Scan on 12/28/2022
- > Consent for Treatment - Scan on 12/28/2022
- > Consent for Treatment - Scan on 12/28/2022
- > EKG - Scan on 12/28/2022
- > EKG - Scan on 12/28/2022
- > Consent for Treatment - Scan on 12/5/2022: TAVR consent

Order-Level Documents on 12/28/2022:

- > Cardiac Studies - Scan on 12/28/2022
- > Laboratory Scanned - Scan on 12/13/2022

Signed

Printable Result Report

Result Report

Encounter

View Encounter