

REASON FOR EXAM: 1. Angina, 2. Coronary artery disease.

INTERPRETATION: This is a technically acceptable study.

DIMENSIONS: Anterior septal wall 1.2, posterior wall 1.2, left ventricular end diastolic 6.0, end systolic 4.7. The left atrium is 3.9.

FINDINGS: Left atrium was mildly to moderately dilated. No masses or thrombi were seen. The left ventricle was mildly dilated with mainly global hypokinesis, more prominent in the inferior septum and inferoposterior wall. The EF was moderately reduced with estimated EF of 40% with near normal thickening. The right atrium was mildly dilated. The right ventricle was normal in size.

Mitral valve showed to be structurally normal with no prolapse or vegetation. There was mild mitral regurgitation on color flow interrogation. The mitral inflow pattern was consistent with pseudonormalization or grade 2 diastolic dysfunction. The aortic valve appeared to be structurally normal. Normal peak velocity. No significant AI. Pulmonic valve showed mild PI. Tricuspid valve showed mild tricuspid regurgitation. Based on which, the right ventricular systolic pressure was estimated to be mildly elevated at 40 to 45 mmHg. Anterior septum appeared to be intact. No pericardial effusion was seen.

CONCLUSION: 1. Mild biatrial enlargement, 2. Normal thickening of the left ventricle with mildly dilated ventricle and EF of 40%, 3. Mild mitral regurgitation, 4. Diastolic dysfunction grade 2, 5. Mild pulmonary hypertension.