



16th July 2025

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## ECHOCARDIOGRAM REPORT

**Re: Mr John Newbould DOB: 23/07/1943**

**History:** AS.

**Height:** 165cm **Weight:** 77kg

1. Aortic root (sinuses)	37	Male 31-37mm, Female 27-33mm
2. Left atrium	47	<40mm
3. Septal thickness	12	07 – 10mm
4. LV end diastolic dimension	50	Male 42-59mm, Female 39-53mm
5. LV end systolic dimension	43	25 – 41mm
6. Post LV wall thickness	12	07 – 10mm
7. Right ventricle	34	27 – 33mm

**CARDIAC CHAMBERS:** Normal left ventricular chamber size and mild global impairment of systolic function. LVEF 55%. (Simpson's); LVEF 50% (Visual). Grade I Diastolic Dysfunction. Right ventricular chamber size and systolic function appears normal. Moderately dilated left atrium (LA volume index = 46ml/m<sup>2</sup>). Mildly dilated right atrium. No pericardial fluid. Mild LVH. No intracardiac thrombus detected.

**CARDIAC VALVES:** Severe aortic stenosis (MG 67mmHg, PG 104mmHg, AVA (VTI) 0.8cm<sup>2</sup>, AVA index (VTI) 0.41cm<sup>2</sup>/m<sup>2</sup>, AVDI 0.12). Trivial aortic regurgitation. Highest gradient at right parasternal view. Tricuspid valve was normal. Pulmonary valve was normal. Insufficient tricuspid regurgitation to estimate pulmonary pressure but no right heart signs to suggest significant pulmonary hypertension.

### CONCLUSION:

1. Mild global LV systolic dysfunction.
2. Severe aortic stenosis (AVDI = 0.21).
3. Moderately dilated LA. Mildly dilated RA.
4. Mild LVH.

Tony Kull

Technician: KE