

Transthoracic Echocardiogram Report

Patient	SHEPHERD, GRAHAM ME00466832			Date	09-07-2025
DOB	15-09-1942	Sex	M	Patient ID	GS150942
Referred by	Dr Peter Hansen E: info@northernheartcentre.com.au			Study ID	A2727/25
Height	1.77 m	Weight	83.1 KG	BSA	2.0 m2
Indication	TAVI workup.				

Measurements

LV/Atrial Chamber Size		Diastology		RV Function/Pulmonary HTN		Aortic Valve	
LVIDd:	5.4 cm	E vel:	132 cm/s	RVS' :	16 cm/s	AV Vmax:	406 cm/s
LVIDs:	3.7 cm	Decel time:	222 ms	TAPSE:	2.6 cm	AV PG:	66 mmHg
IVSWd:	1.0 cm	A vel:	139 cm/s	RV Frac:	-	AV MG:	35 mmHg
LVPWd:	0.8 cm	E/A:	0.9	PAAT:	-	AV VTI:	99.9 cm
LA size:	-	E' sept:	5 cm/s	RV Base:	4.3 cm	LVOT Vmax:	119 cm/s
EF BP:	-	E' lateral:	12 cm/s	RV Mid. :	-	LVOT VTI:	27.6 cm
LA Area:	31 cm2	E/E' avg:	-	RV Length:	-	AVA VTI:	1.1 cm2
LA Vol Ind:	50 ml/m2			TR Vmax:	3.0 m/s	AVAi:	0.57 cm2/m2
RA Area:	26 cm2			RVSP-RA:	36 mmHg	SVi:	56 mL/m2
GLS:	[-]			IVC:	1.6 cm		
				Collapse=>50%:	Yes		
Mitral Valve		Aorta		Tricuspid Valve		Pulmonary Valve	
MV MG:	-	LVOT Diam:	2.3 cm	TV MG:		PV Vmax:	-
PHT:	-	AoRD :	4.3 cm	TV pk E:		PV PG:	-
MVA (PHT):	-	Asc Aorta:	4.0 cm			Qp:Qs	
		Arch:	3.7 cm				

Comments

Left Ventricle	Normal left ventricular size and systolic function. Ejection fraction estimated at around 60-65%. No segmental abnormality detected.
LV Wall Thickness	Normal left ventricular wall thickness. apart from moderate focal basal hypertrophy associated with a moderately sigmoid-shaped septum, protruding mildly into the LVOT. Haemodynamically insignificant.
Right Ventricle	Normal right ventricular chamber size and systolic function.
Left Atrium	Moderately dilated left atrium.
Right Atrium	Mildly dilated right atrium.
Aortic Valve	Trileaflet aortic valve. Markedly thickened and calcified leaflets. Markedly restricted valve opening on 2D (clips 19, 25). Doppler data as in the table above. Peak velocity and AVAi in the severe range. Trivial aortic regurgitation within normal limits.
Mitral Valve	Mildly thickened mitral leaflets. Mild to moderate mitral regurgitation.
Tricuspid Valve	Normal tricuspid valve structure. Mild tricuspid regurgitation.
PASP	PASP 39 mmHg assuming RA pressure of 3 mmHg.
Pulmonary Valve	Normal pulmonary valve structure and function.
Aorta	Mildly dilated aortic root. Mildly dilated ascending aorta. Mildly dilated arch.
Pericardium	No pericardial effusion.
Additional Notes	No mass seen. No shunt detected with colour Doppler evaluation. No atrial septal aneurysm.

Conclusions

- Sinus rhythm. 79/min.
- Normal left ventricular size and systolic function. Ejection fraction estimated at around 60-65%. No segmental abnormality detected.
- Normal left ventricular wall thickness, apart from moderate focal basal hypertrophy associated with a moderately sigmoid-shaped septum, protruding mildly into the LVOT. Haemodynamically insignificant.
- Normal right ventricular chamber size and systolic function.
- Moderately dilated left atrium. Mildly dilated right atrium.
- Trileaflet aortic valve. Markedly thickened and calcified leaflets. Markedly restricted valve opening on 2D (clips 19, 25). Doppler data as in the table above. Peak velocity and AVAi in the severe range. Trivial aortic regurgitation within normal limits.
- Mildly thickened mitral leaflets. Mild to moderate mitral regurgitation.
- Normal tricuspid valve structure. Mild tricuspid regurgitation. Mild pulmonary hypertension.
- Mildly dilated aortic root. Mildly dilated ascending aorta. Mildly dilated arch.