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Transthoracic Echocardiogram Report

Ms Michelle Perry DOB: 02/04/76
4/205 Liebig Street WARRNAMBOOL 3280

Date of scan: 4/05/2022

Dr Anita Pallot
Middle Island Medical Clinic
43 Fairy Street
WARRNAMBOOL VIC 3280

Indications: Possible old infarct on ECG, with worsening shortness of breath on exertion last 6 months. Lower limb swelling at end of the day, now short of breath eating meals and phone conversations. ? cardiac failusre ? old septal infract, no chest pain.
Image Quality: Average
Rhythm: Sinus Rhythm Height (cm): 167 Weight (kg): 59 **Operator:** Jacqui Bowman

Left Ventricle
LV diastole mm: 45 (N<57)
LV Septum mm: 7 (N<11)
Post Val Salva E/A:
LV inf/lat mm: 8 (N<11)
Global Longitudinal Strain %: (N <-16)
LV Ejection Fraction %: 64 (N>50%)

Diastology
Mva>PVa: PVs<PVd:
MV E: 0.8 MV A : 0.4 E/A: 2.1

E': 0.15 A': E/E': 5
MV Decel time s:
IVRT:

Aortic Valve
Peak Velocity m/s: 1.7 (N<1.7)
Peak Gradient mmHg:
Mean Gradient mmHg:
Calculated Valve Area cm2: (N>2)

LVOT peak velocity m/s: 1.3 (N<1.1)
LVOT diameter mm:
Dimensionless Index:
Aortic root mm: 29 (N<37)

Mitral Valve
MV mean gradient mmHg:
MV Area cm2:

Atria
LA mm: (N<40) LA Volume mL/m2: 42 (N <34)
LA area cm2: 21 (N<20) RA area cm2: 16 (N<18)

Right Heart
Tricuspid pk vel m/s: (N<2.5)
Estimated RAp: 3 (N<8)
Est PASp mmHg: (N<35)

Pumonary Acceleration Time ms: (N>120)
Pulmonary Valve mean gradient mmHg:
TAPSI mm: 21 (N>16)

Report:
Normal left ventricular cavity size and wall thickness. Normal systolic function, ejection fraction estimated at 64%, using Simpson's biplane method. Normal diastolic function.
Unrestricted, trileaflet aortic valve. Normal size aortic root and ascending aorta.
Normal mitral valve morphology and motion with trivial regurgitation.
Normal right ventricular size and systolic function. Trivial tricuspid regurgitation, insufficient to accurately estimate pulmonary artery systolic pressure. Normal size inferior vena cava with normal inspiratory collapse.
Mildly dilated left atrium, normal size right atrium.

Conclusion: 1. Normal LV systolic function. 2. No significant valvular disease. 3. Mildly dilated left atrium.

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