The St. Joseph Healthcare System

New Mexico

NEH HOSPITAL

ECHOCARDIOGRAM REPORT

NAME:	AGE/SEX: 66 M	ROOM: OP	DATE: 2-13-95
MR #: 581427	BOX #: NMHI 95-1		DOB:
TECH: DW	REQUESTING PHYSICIAN:		
REASON FOR ECHOCARDIOGRAM:	MURMUR; SOB		

M-MODE MEASUREMENT

	Adult Normal	
Aortic Root Diameter	2.0-3.7cm	4.0 cm
Left Atrial Dimension	1.9-4.0cm	3.9 cm
IV Septal Thickness	0.6-1.1cm	1.0 cm
LV Post. Wall Thickness	0.6-1.1cm	1.0 cm
LV Int. Dimension (Diastole)	3.5-5.5cm	5.6 cm
LV Int. Dimension (Systole)	2.4-3.4cm	3.4 cm
Fractional Shortening	29-40%	40% cm
RV Int. Dimension (Diastole)	0.7-2.3cm	2.4 cm

Other _____

DOPPLER MEASUREMENT

	Adult Normal	
Aortic Valve Peak Velocity	1.7m/sec	____ M/sec
Aortic Valve Peak Gradient	mmHg	____ mmHg
Aortic Valve Area (Continuity Eq.)	cm2	____ cm2
Mitral Valve Pressure Half-Time	msec	____ msec
Mitral Valve Area	cm2	____ cm2
TR MAX PG	mmHg	34 mmHg
AI P 1/2 T	m/sec	545 m/sec

Other _____

INTERPRETATION:

2-D, M-mode and Echo/Doppler findings:

This is a technically difficult study. There is mild left ventricular and atrial enlargement with right-heart chambers normal in size. The left ventricle shows normal segmental function and ejection fraction is normal as well. The mitral valve is redundant, myxomatously degenerated and prolapsing. Severe mitral regurgitation is seen on color flow study. Mild pulmonic and tricuspid regurgitation are also noted on color flow. Other cardiac valves appear normal. There is no pericardial effusion. The aortic root is mildly enlarged. The pulmonary artery appears normal. IVC dynamics are normal. Estimated pulmonary artery pressure is 35-40 mmHg.

CONCLUSIONS:

1. Myxomatously degenerated mitral valve with prolapse and severe mitral regurgitation.
2. Mild left ventricular and atrial enlargement with normal left ventricular systolic function.
3. Mild pulmonic and tricuspid regurgitation.
4. Mildly enlarged aortic root.

Dictated: 1-14-95