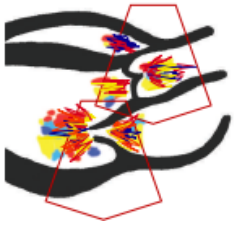
Normal Echo Template

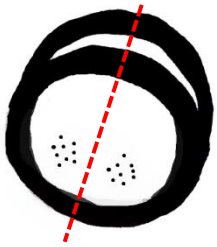
RIGHT PARASTERNAL LONG AXIS
Centre on MV, include roof of LA; Incr loop length if AF / VPCs / Tachycardia

RPLA – LEFT VENTRICLE
Centre on LV, include true apex
For measurement of LV volumes

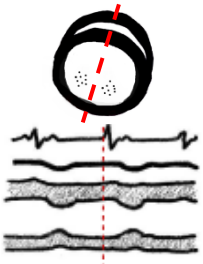
RPLA – LV OUTFLOW TRACT
Narrow sector width if required to maximise frame rate



RPLA WITH COLOUR
Colour MV, TV, LVOT & AoV, intra-atrial septum; to include all of any regurgitant/transeptal jets seen.



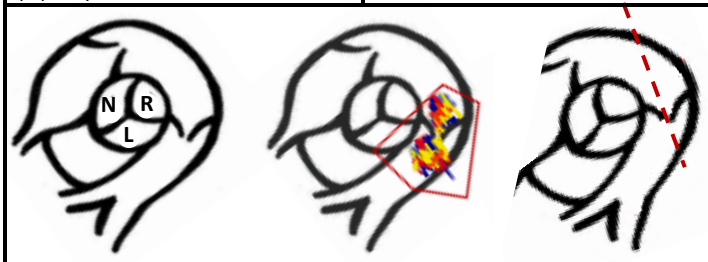
RIGHT PARASTERNAL SA – LV
Loop of the LV at chordae level, even papillary muscles, rounded LV



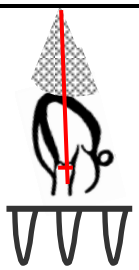
RPSA – M-mode of LV
Cursor bisecting LV, M-mode through mitral annulus to measure EPSS

RPSA – LA/Ao
2D measurements of LA, Ao, PA.

RPSA – LA/Ao WITH COLOUR
Colour interrogation of IAS, TV, Ao root for VSDs

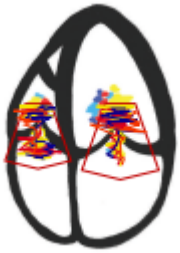


RPSA – RVOT
2D, Colour and Doppler interrogation of TV, RVOT & PA. PWD gate at level of PV, attempt to line up cursor parallel to flow direction



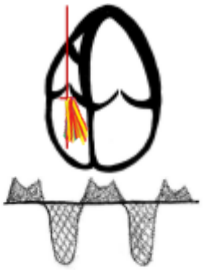
SUBCOSTAL
PW/CW through AoV

LEFT APICAL 4 CHAMBER
Attempt alignment with LV apex



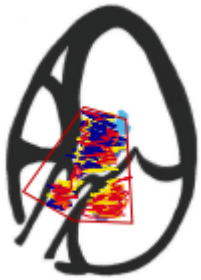
COLOUR DOPPLER OF MV & TV
Assess size, direction & extent of MR & TR.

MITRAL INFLOW PW
Gate placed at tips of open valve. Use CW to assess MR

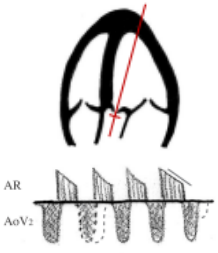


CW DOPPLER OF TV to estimate RV pressure, use PW to assess inflow

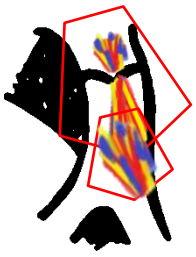
APICAL 5 CHAMBER
To visualise LVOT



COLOUR DOPPLER OF AO VALVE
Extend colour box to cover all AR



PW/CW of AoV
Cursor in line with blood flow, use colour to guide



LEFT CRANIAL PA 2D/COLOUR
Interrogation of RVOT/PV, extend into MPA to look for PDA

LEFT CRANIAL PA PW/CW
Align curser through valve tips

RECOMMENDED VIEWS FOR A STANDARD VETERINARY ECHOCARDIOGRAM

www.heartvets.co.uk

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