

U **Medicine**

The RV:LV ratio should be less than 0.6:1. This can be compared in both the subcostal 4 chamber or apical 4 chamber. It is not accurate in other heart views but can be estimated in those

Name:

Trabeculations and Moderator band can be used to distinguish the RV from the LV. The more common and reliable way is to use the apically inserted tricuspid valve position. The tricuspid valve always inserts a little more apical than the mitral valve and can be used in case the operator has the probe in the wrong direction

4		
5		

Question 3 and 4 both illustrate the importance of the apical four chamber view. RV function and size is best estimated in these even though other heart views can be used, this is the most reliable that you are not cutting your plane in the wrong area

Visual comparison with LV can help you estimate the significance of the size of the RV. It should be 0.6 the size of the LV. In a normal heart, the LV forms the apex, when the RV pressure or volume increases, the RV begins to form the apex.

1. In subcostal 4 chamber view, assessment of RV size:

- A. Always unreliable
- B. Based on comparing relative sizes of RV and LV
- C. Sometimes unreliable and additional cardiac views necessary
- D. B and C

2. Features that can be used to distinguish between RV and LV on apical four chamber view:

- A. Apical trabeculations
- B. Apically located tricuspid valve when compared to mitral valve
- C. Moderator band
- D. All of the above

3. Which of the following is best for assessment of the global RV function?

- A. Parasternal long axis
- B. Apical four chamber
- C. Parasternal short axis aortic valve level
- D. Parasternal short axis apical level

4. Which of the following is best for assessment of RV size?

- A. Parasternal long axis
- B. Apical four chamber view
- C. Parasternal short axis aortic valve level
- D. Parasternal short axis apical level

5. Assessment of RV size on transthoracic echo is best done with:

- A. Taking ratio of Moderator band to RV cavity
- B. M-mode through RV cavity
- C. Visual comparison to LV in Apical four chamber view
- D. Assessing which of the two ventricles forms the apex in the apical four chamber view
- E. C and D