

Those are all techniques that can be used to improve the images obtained.

Ultra

Self Learning Test - Subcostal Heart View

Name:

Question	Answer	Score
2		
3		
4		
5		

Even though the aorta can be visualized, assessment with doppler may not be as accurate as other views

The probe marker position is towards the left of the patient or 3 o'clock position and everything on the monitor corresponds to the opposite side.

Liver actually helps the view, lung does not come in the way usually and can also help when there are large effusions. Stomach can definitely make this view difficult and the best way to get around it is with slow, steady pressure as to get the gas out of the way

1. Techniques that can be used to improving images on subcostal views are:

- A. Bending legs at the knees
- B. Supine position on the back
- C. Transducer in subxiphoid position
- D. All of the above

2. Which of the following is not a clinical utility of the subcostal four chamber view:

- A. Assessment of aortic valve with color doppler
- B. Assessment of LV function and size
- C. Assessment of pericardium for fluid
- D. Assessment of right atrial and ventricular diastolic collapse in the setting of tamponade

3. In the subcostal four chamber view, the left side of the ultrasound corresponds to:

- A. The right side of the body
- B. The left side of the body
- C. The cranial (head) aspect of the body
- D. The caudal (feet) aspect of the body

4. Which direction is the probe marker when obtaining the subcostal view?

- A. 12 o'clock position
- B. 3 o'clock position
- C. 6 o'clock position
- D. 9 o'clock position

5. What organ can sometimes make the subcostal view difficult to obtain?

- A. Liver
- B. Lung
- C. Stomach/Bowel
- D. Pancreas