

Full Anatomical Study (The Standard Echocardiogram)

Window	Anatomy	Images	Notes
Subcostal	Abdominal Situs	<ul style="list-style-type: none"> ○ Transverse (short axis) situs view with cross-section of IVC, Abd Ao, spine (2D + colour) ○ Transverse (short axis) situs sweep from cross-section cephalically to the heart (2D + colour) ○ Sweep from short axis to long axis of IVC then sweep to the Abd Ao (2D + colour) 	<p>Indicator at 3 o'clock</p> <p>Demonstrate the IVC draining to atria</p> <p>Demonstrate position of the heart and apex</p>
	IVC	<ul style="list-style-type: none"> ○ Long axis view of IVC (2D +colour) ○ PW hepatic vein 	Decrease sweep speed to show respiratory variation
	Abd Ao	<ul style="list-style-type: none"> ○ Long axis view of Abd Ao (2D +colour) ○ PW Abd Ao 	Optimize Doppler angle
	Full Heart	<ul style="list-style-type: none"> ○ Coronal long axis sweep from posterior to anterior (2D + colour) ○ Sagittal short axis sweep from right to left (2D + colour) 	<p>Indicator at 3 o'clock</p> <p>Indicator ~ 5 o'clock</p>
	SVC	<ul style="list-style-type: none"> ○ "Bicaval view" (2D + colour) ○ PW SVC 	Indicator ~ 6 o'clock
	RVOT	<ul style="list-style-type: none"> ○ RVOT view with pulmonary valve (2D + colour) 	Indicator ~ 7 o'clock
	LVOT	<ul style="list-style-type: none"> ○ LVOT view with aortic valve and ascending aorta (2D + colour) 	Indicator ~ 4 o'clock

Parasternal Long Axis	LV, AoV, MV	<ul style="list-style-type: none"> ○ Parasternal Long Axis (2D) ○ AoV (colour) ■ Measure AoV annulus ○ MV (colour) 	Indicator toward patient's right shoulder
	RV inflow	<ul style="list-style-type: none"> ○ RV IT view (2D + colour) ■ CW TR (estimate RVSp) 	Ensure the LV is no longer in view
	RV outflow	<ul style="list-style-type: none"> ○ RVOT view (2D + colour) ■ CW through RVOT (measure peak gradient and estimate meanPAP) 	Measure PI only at early diastole, mean PAP reliable only with < mild+ PI
	VSD (r/o)	<ul style="list-style-type: none"> ○ Sweep the IVS from RVOT to RVIT (2D + colour) 	Use appropriate colour scale

Full Anatomical Study (The Standard Echocardiogram)

Window	Anatomy	Images	Notes
Parasternal Short Axis	VSD (r/o)	<ul style="list-style-type: none"> ○ Sweep IVS from AoV level to apex (2D + colour) 	May need to do 2 sweeps (one with colour box over anterior septum, one over inferior septum)
	M-mode	<ul style="list-style-type: none"> ■ M-mode of ventricles (measure RVd, IVSd, LVd, PW, LVs) – report FS/EF 	Just below the MV leaflets; RV anterior to LV
	AoV level	<ul style="list-style-type: none"> ○ AoV level (2D + colour) ○ Tricuspid Valve (2D + colour + CW TR) ○ Pulmonary Valve (2D + colour) ■ Measure PV annulus ■ CW through RVOT (estimate meanPAp) 	Demonstrate tricuspid AoV
	Coronary arteries	<ul style="list-style-type: none"> ○ RCA origin (2D + colour) ○ LCA origin with bifurcation of LAD and Cx (2D + colour) 	Try rotating clockwise to open LCA origin
	MV level	<ul style="list-style-type: none"> ○ Mitral Valve (2D + colour) 	Ensure entire anterior MV leaflet is seen
	LV levels	<ul style="list-style-type: none"> ○ Basal level ○ Papillary Muscle level ○ Apical level 	Demonstrate function + wall motion + septal curv

High Parasternal	Branch PAs	<ul style="list-style-type: none"> ○ Branch pulmonary arteries with bifurcation (2D + Colour) ■ Measure RPA and LPA origin 	Indicator ~ 3 o'clock
	Pulmonary Veins	<ul style="list-style-type: none"> ○ "Crab view" of four pulmonary veins draining to LA (2D + colour) 	Angle anteriorly from Branch PAs, can try in SSN or subcostal if not well seen (esp RUPV)
	PDA (r/o) and isthmus	<ul style="list-style-type: none"> ○ "Ductal cut" demonstrating LPA and Ao isthmus side-by-side (2D + colour) ○ Colour sweep right to left to r/o small PDA 	Indicator ~ 12 o'clock

Full Anatomical Study (The Standard Echocardiogram)

Window	Anatomy	Images	Notes
Apical	4 chamber	<ul style="list-style-type: none"> ○ All 4 chambers (2D) ○ Colour LV inflow M Measure MV annulus ○ PW mitral inflow ○ PW for IVRT ○ PW pulmonary vein 	Ensure your LV apex is centered in your near-field, optimize Doppler angle
	4 chamber-RV	<ul style="list-style-type: none"> ○ RA and RV (2D) ○ Colour RV inflow M Measure TV annulus ○ PW tricuspid inflow M CW TR (estimate RVSp) 	Slide medially to place RV apex in center of near-field
	5 chamber	<ul style="list-style-type: none"> ○ LVOT (2D + colour) M CW LVOT (measure peak gradient) 	Angle anteriorly with slight clockwise rotation
	2 chamber	<ul style="list-style-type: none"> ○ LA and LV (2D + colour) 	Rotate counter-clockwise (~1:00)
	3 chamber	<ul style="list-style-type: none"> ○ “Apical long axis” with MV and AoV (2D + colour) 	Rotate counter-clockwise (~11:00)
	VSD (r/o)	<ul style="list-style-type: none"> ○ Colour sweep IVS from anterior to posterior 	From a medial 4 chamber view
Supra-sternal	Arch Sidedness	<ul style="list-style-type: none"> ○ Sweep superiorly to demonstrate branching pattern and determine arch sidedness (2D + colour) 	Indicator at 3 o'clock
	LSVC (r/o)	<ul style="list-style-type: none"> ○ Colour sweep laterally to follow the innominate vein toward left side 	Ensure low velocity scale
	RSVC	<ul style="list-style-type: none"> ○ RSVC (2D + colour) 	Indicator at 3 o'clock
	Aortic Arch	<ul style="list-style-type: none"> ○ Long Axis of aortic arch (2D + colour) ○ CW descending aorta 	Indicator at 12 o'clock if left arch