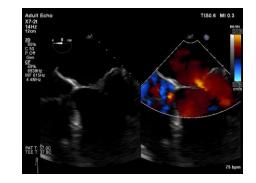
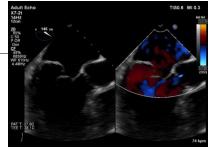
Coffee and cases I use 3D for Valve Cases all the time

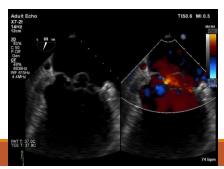
MADALINA PETRESCU, MD SWEDISH MEDICAL CENTER JANUARY 2018

Case 1:50 yo M presenting with increasing dyspnea *What is the pathology?*

- A. Flail P1
- B. Flail P2
- C. Flail A2
- D. Flail A2

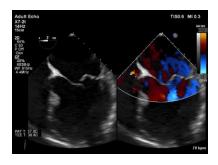


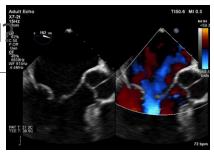


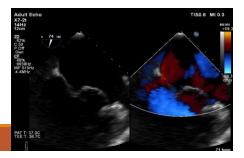


MVP case #2: Which scallop is involved 53 yo M with exercise intolerance & fatigue

- A. Flail P1
- B. Flail P3
- C. Flail A1
- D. Flail A3







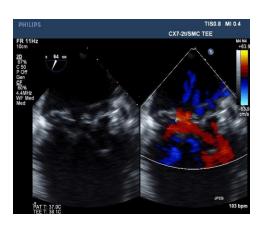
No 2 flail pathologies are created equal

80 yo frail female with multiple co-morbidities with increasing dyspnea referred to our structural program for consideration of mitraclip repair



Case #3: Which scallop is flail? 78 yo F + DOE, referred to heart team for surgery vs mitraclip





3D en face view

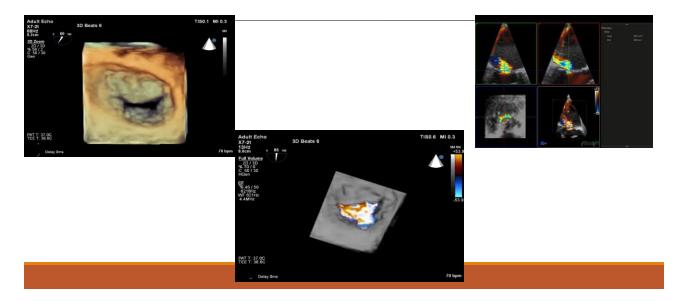


80 Y F with progressive dyspnea and increased hospitalizations for HF **What's the pathology and MR severity?**

- A. FMR with significant MR
- FMR with non-significant (mild) MR
- C. DMR with significant MR
- DMR with non-significant (mild) MR

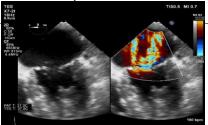


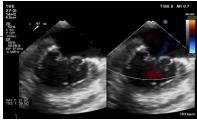
Benefit of 3DE: Insight into mechanism and disease severity



85 yo with SOB referred to the structural clinic for consideration of mitraclip:

- Pathology?
- A. Anterior leaflet cleft
- B. Posterior leaflet cleft
- C. Anterior leaflet perforation
- D. Posterior leaflet perforation

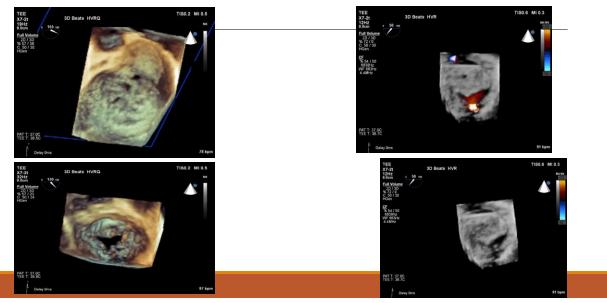




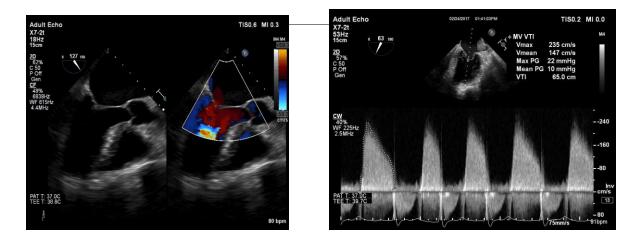




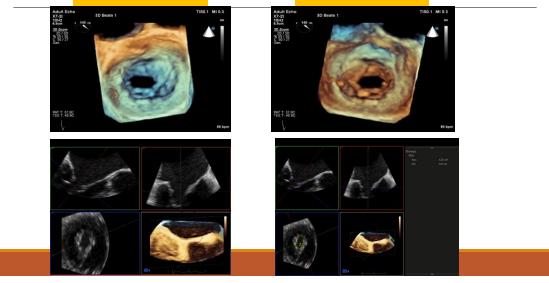
3DE en face view, with color



73 yo admitted with rapid afib and CHF



A better understanding using 3DE Above the valve Below the valve



80 yo with DOE referred for consideration for mitraclip **What's the pathology?**

A. A2 flail B. A3 flail C. P2 flail D. P3 flail



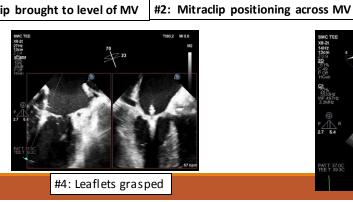
 Share
 SD Gets 1
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 ME O.3

 SD John
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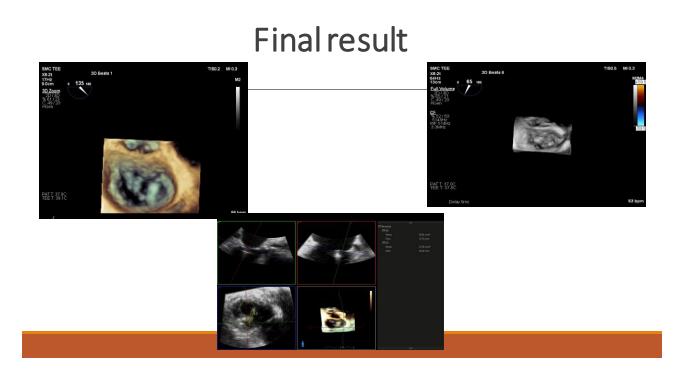
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#3: Leaflelt grasping







Thank you for your attention!