**Latvijas Republikas Transtorakālās Ehokardiogrāfijas izmeklējuma protokols**

**Vārds, uzvārds \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.k. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BSA \_\_\_\_\_\_ m2 Datums\_\_\_\_\_\_\_\_\_\_\_ Iestādes nosaukums \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Ritms:** **\_\_\_\_\_\_\_\_** x min. □ sinusa □ ĀF/ĀU □ biežas ES □ EKS

**Eho-kvalitāte:**

Parasternāli □ laba □ vidēja □ slikta

Apikāli □ laba □ vidēja □ slikta

|  |  |
| --- | --- |
| KK diametrs diastolē (EDD) \_\_\_\_\_\_\_ mm (S ≤ 52, V ≤ 58) KK diametrs sistolē (ESD) \_\_\_\_\_\_\_\_ mm (S ≤ 35, V ≤ 40)Kambaru starpsiena (IVSd)\_\_\_\_\_\_\_\_ mm (S ≤ 9, V ≤ 10)Mugurējā siena (PWd)\_\_\_\_\_\_\_\_\_\_\_ mm(S ≤ 9, V ≤ 10)KK masas indekss (LVMI, M-r) \_\_\_\_g/m2 (S ≤ 95, V ≤ 115)KK masas indekss (LVMI, 2-D) \_\_\_\_g/m2 (S ≤ 88, V ≤ 102)KK tilpums diastolē (EDV) \_\_\_\_\_\_\_ ml (S ≤ 106, V ≤ 150)KK tilpums sistolē (ESV) \_\_\_\_\_\_\_\_\_ ml (S ≤ 42, V ≤ 61)KK EDV/BSA ml/m2 (S ≤ 61, V ≤ 74)KK ESV/BSA ml/m2 (S ≤ 24, V ≤ 31)Izsviedes frakcija (EF, M-r/2-D) %(S ≥ 54, V ≥ 52)Frakcionētā saīsināšanās (FS) \_\_\_\_\_\_\_\_\_\_ %(≥ 25)  | Aorta (Sinus Valsalva) \_\_\_\_\_\_\_\_\_\_ mm **(** S≤ 33, V ≤ 37**)**Ascendējošā aorta (Ao asc) \_\_\_\_\_\_ mm (S ≤ 31, V ≤ 34)Sinotubulārais sav. (ST Jxn) \_\_\_\_\_\_ mm (S ≤ 29, V ≤ 32)Kreisais priekškambaris (LA) \_\_\_\_\_ mm (S ≤ 38, V ≤ 40)KP tilpuma indekss (LAVI) \_\_\_\_\_\_ ml/m2 (≤ 34) KK izejas trakts (LVOT) \_\_\_\_\_\_\_\_\_mmLP tilpuma indekss (RAVI) ml/m2 (S ≤ 27, V ≤ 32) LK izejas trakts (RVOT) \_\_\_\_\_mm (SAX ≤ 35, PLAX ≤ 30)LK bazālais diametrs (RVD) \_\_\_\_\_\_mm (≤ 41)TAPSE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mm (≥ 17) Apakšējā dobā vēna (IVC) \_\_\_\_\_\_\_\_ mm (≤ 20)ieelpā kolabē □ > 50% □ < 50% □ nekolabē |
|  |   |
| AoV **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | FG \_\_\_\_\_\_\_ cm |
| MV \_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | FG \_\_\_\_\_\_\_ cm |
| TV \_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | FG \_\_**\_\_\_\_\_** cm |
| PV **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | FG **\_\_\_\_\_\_\_**  cm |

**Diastoliskā funkcija:** □ vecuma norma □ disfunkcija **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| IVRT \_\_\_\_\_ ms | DT \_\_\_\_\_ ms | E/A \_\_\_\_\_KK pildīšanās spiediens: E/E’vid < 8 norma, E/E’≥13 paaugstināts. | E`vid \_\_\_\_\_\_ cm/s  | E/E’ \_\_\_\_\_  | S/D \_\_\_\_\_\_ |

**Labā kambara sistoliskais spiediens: \_\_\_\_\_\_\_\_\_\_\_** mm Hg (< 30)

**Doppler EhoKG:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | V max(m/s) | PG max(mmHg) | PG vid.(mmHg) | Atveres laukums (cm2) | PHT (ms) | VC (mm) | Regurgitācija(I-IV) |
| AoV |  |  |  |  |  |  |  |
| MV |  |  |  |  |  |  |  |
| TV |  |  |  |  |  |  |  |
| PV |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | V max (m/s) | PG max (mmHg) | PG max Valsalva (mmHg) | VTI (cm) | SV ind. (ml/m2) | CO ind. (l/min/m2) |
| LVOT |  |  |  |  |  |  |

**Perikards:**  □ norma □ šķidrums **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Priekšēji-septālā

**Kreisā kambara reģionālā kontraktilitāte:**

Normokinēzija – 1

Priekšējā

Septālā

Hipokinēzija – 2

Akinēzija – 3

Diskinēzija – 4

Sānu

Apakšējā

 Mugurējā

**SLĒDZIENS:**

**Ārsts :**

**EhoKG protokolā norādītās neindeksētās normas atspoguļo vidējo rādītāju populācijā un neatspoguļo individuālās variācijas atkarībā no pacienta auguma un ķermeņa virsmas laukuma (BSA).**

BSA – *body surface area* (ķermeņa virsmas laukums)

DT – *deceleration time* (decelerācijas laiks)

IVRT – *isovolemic relaxation time* (izovolēmiskās relaksācijas laiks)

LA/RA – *left atrium /right atrium* (kreisais priekškambaris, KP/ labais priekškambaris, LP)

LV/RV – *left ventricle / right ventricle* (kreisais kambaris, KK / labais kambaris, LK )

LVOT – *left ventricular outflow tract* (kreisā kambara izejas trakts)

PHT – *pressure half time* (spiediena puslaiks)

TAPSE – *tricuspidal annular plane systolic excursion* (trikuspidālās vārstules fibrozā gredzena ekskursija sistolē)

VC – *vena contracta* (regurgitācijas strūklas šaurākā vieta)

LR Ehokardiogrāfijas izmeklējuma protokols adaptēts pēc ASE un EACVI 2015. g. rekomendācijām .

LR Ehokardiogrāfijas izmeklējuma protokols apstiprināts LKB Rīgā, 2015.gada 11.maijā.