

INCREMENTAL DIAGNOSTIC YIELD OF LIVE 3D TEE IN INFECTIVE ENDOCARDITIS

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A 57 year old Caucasian male presented with fever, positive blood cultures with staph aureus and embolic phenomenon to the kidney and lower extremities. Conventional transthoracic echocardiography (TTE) did not show valvular vegetation. No valvular vegetation was noted on 2D transesophageal echocardiography (TEE). A mobile vegetation was found on live 3D TEE imaging. Our case illustrates the incremental diagnostic utility of 3D TEE to diagnose small valvular vegetations that may be missed on 2D TTE and TEE.

Figure 1 - Mid transesophageal echocardiographic 3 chamber view showing a normal appearing aortic valve in systolic (A) and diastolic (B) frames on 2D imaging. C is a full time 3D TEE image showing a mobile vegetation protruding from the aortic valve into the left ventricular outflow tract (red arrow). The black space under the red arrow is echo drop out.

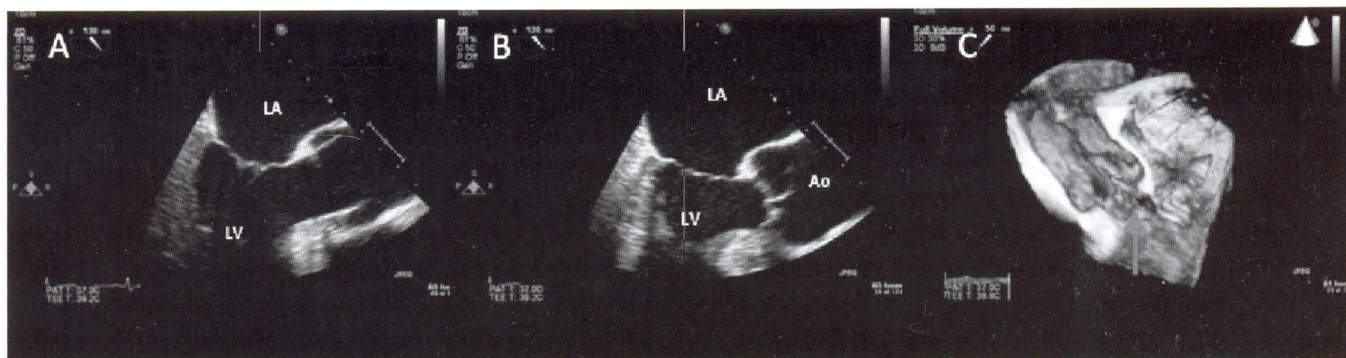
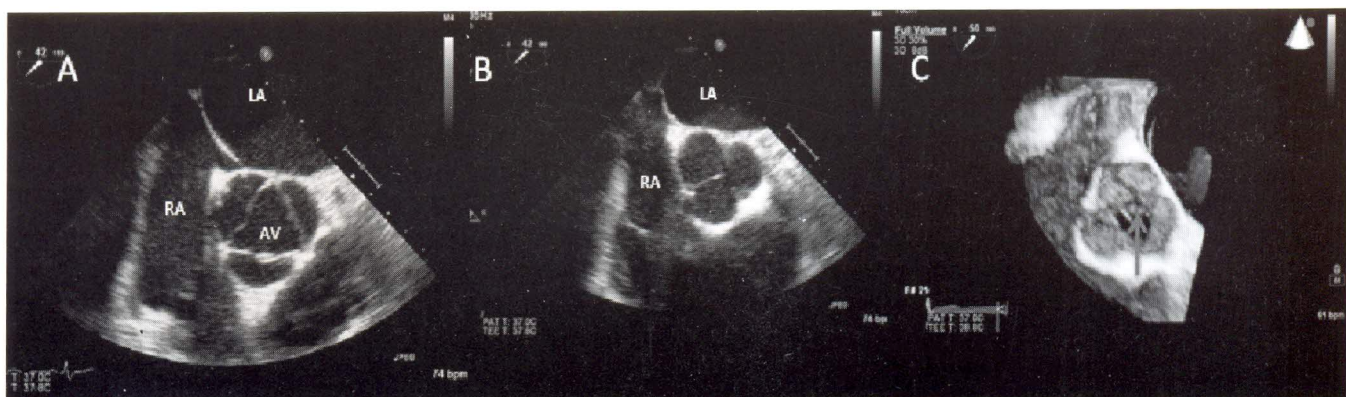


Figure 2 - Mid transesophageal Echocardiographic short axis view showing a normal appearing aortic valve in systolic (A) and diastolic (B) frames on 2D imaging. C is a full volume 3D TEE image showing a mobile vegetation protruding from the aortic valve into the left ventricular outflow tract (red arrow).



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