

## **4D Image Acquisition of Chambers Guide**

### **Probes**

Adult Transthoracic probes: **4V or 4Vc-D** 

Paediatric Transthoracic probe: **6Vc-D** (Please note Auto LVQ, Auto RVQ and Auto LAQ tools are not available with this probe) Transoesophageal probe: **6Vt-D** 

# Left Ventricle

Image capture process is the same for Transthoracic Echo (TTE) and Transoesophageal Echo (TOE)

Suggested TTE view: Apical 4 chamber view

Suggested TOE view: Mid Oesophageal 2 chamber or Mid Oesophageal 4 chamber view

- 1. Adjust depth/width of image to ensure all of LV walls are present in the sector, including MV annulus.
- 2. Press *Large* volume on the touch screen
- **3.** <u>**OPTIONAL**</u> Press the **Angle** button on control panel to change view to that of the ventricle (4 pre-defined views with a yellow arrow depicting viewing position)
- 4. **OPTIONAL** Select **Multi-Slice** on the touch screen, visualisation tool to help check all of LV walls are within the sector
- 5. Adjust probe position as needed to ensure all wall segments can be seen in the sector
- 6. Volume size (depth and width) can be adjusted with the far-left rotary button BUT WATCH THE FRAME RATE!
- 7. **OPTIONAL** Gain adjustments (2D & 4D) can be performed during acquisition or afterwards during post processing
- Check Frame Rate (top right of screen) needs to be >12 FPS for auto 4D LV volume analysis (>25FPS for 4D strain analysis, TTE only). Please note you will require higher frame rates for higher heart rates, to aid accurate assessment.
  - a. Either turn frame rate up or down with *Frame Rate* rotary button (far right on control panel), adjust according to balance of resolution loss.
  - b. Or with a more regular rhythm you can use *Multi-Beat*. Select number of cycles required on touch screen (keep to lowest number needed). Ask patient to perform a breath hold at point of best image then press *Multi-Beat* button on touch screen. In *Multi-Slice* function can clearly see if any stitching artefacts (lines across the image)
- 9. *Image Store* when ready.



### **Right Ventricle**

Image capture process is the same for Transthoracic Echo (TTE) and Transoesophageal Echo (TOE)

Suggested TTE view: Apical 4 chamber view modified for RV

Suggested TOE view: Mid Oesophageal 4 chamber view

- 1. Adjust depth of image to ensure all of RV walls are present in the sector, including TV annulus.
- 2. Press *Large* volume on the touch screen
- **3.** <u>**OPTIONAL**</u> Press the *Angle* button on control panel to change view to that of the ventricle (4 pre-defined views with a yellow arrow depicting viewing position)
- 4. **OPTIONAL** Select **Multi-Slice** on the touch screen, visualisation tool to help check all of RV walls are within the sector
- 5. Adjust probe position as needed to ensure all wall segments can be seen in the sector
- 6. Volume size (depth and width) can be adjusted with the far-left rotary button BUT WATCH THE FRAME RATE!
- 7. **OPTIONAL** Gain adjustments (2D & 4D) can be performed during acquisition or afterwards during post processing
- 8. Check Frame Rate (top right of screen) needs to be >12 FPS for Auto RVQ. Please note you will require higher frame rates for higher heart rates, to aid accurate assessment.
  - a. Either turn frame rate up or down with *Frame Rate* rotary button (far right on control panel), adjust according to balance of resolution loss.
  - b. Or with a more regular rhythm you can use *Multi-Beat*. Select number of cycles required on touch screen (keep to lowest number needed). Ask patient to perform a breath hold at point of best image then press *Multi-Beat* button on touch screen. In *Multi-Slice* function can clearly see if any stitching artefacts (lines across the image)
- 9. *Image Store* when ready.



#### <u>Left Atrium</u>

Suggested TTE view: Apical 4 chamber view

Please note Auto LAQ is NOT available for TOE images

- 1. Adjust depth of image to ensure LV and LA walls are present in the sector
- 2. Press *Large* volume on the touch screen
- **3.** <u>**OPTIONAL**</u> Press the *Angle* button on control panel to change view to that of the ventricle (4 pre-defined views with a yellow arrow depicting viewing position)
- 4. **OPTIONAL** Select **Multi-Slice** on the touch screen, visualisation tool to help check all of LA walls are within the sector
- 5. Adjust probe position as needed to ensure all walls can be seen in the sector
- 6. Volume size (depth and width) can be adjusted with the far-left rotary button BUT WATCH THE FRAME RATE!
- 7. **OPTIONAL** Gain adjustments (2D & 4D) can be performed during acquisition or afterwards during post processing
- 8. Check Frame Rate (top right of screen) needs to be >12 FPS for Auto LAQ. Please note you will require higher frame rates for higher heart rates, to aid accurate assessment.
  - a. Either turn frame rate up or down with *Frame Rate* rotary button (far right on control panel), adjust according to balance of resolution loss.
  - b. Or with a more regular rhythm you can use *Multi-Beat*. Select number of cycles required on touch screen (keep to lowest number needed). Ask patient to perform a breath hold at point of best image then press *Multi-Beat* button on touch screen. In *Multi-Slice* function can clearly see if any stitching artefacts (lines across the image)
- 9. *Image Store* when ready.

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