



When heart teams<sup>\*</sup> consider conventional surgery or TEER not indicated in patients with primary or secondary MR, TMVR therapy is the preferred option if the patient is deemed clinically and anatomically suitable.<sup>1</sup>

## 1. STANDARD TTE<sup>2</sup>

• Parasternal long and short axis

#### **Assess:**

- Ventricular dimensions: LVESD: >3 cm or LVEDD: ≤7cm
- $EF \ge 30\%$
- Length of AML < 25mm and distance AML Septum > 6mm, to avoid SAM
- Anterior-Posterior (AP) dimension: 25-42mm

# 2.STANDARD TEE<sup>2</sup>

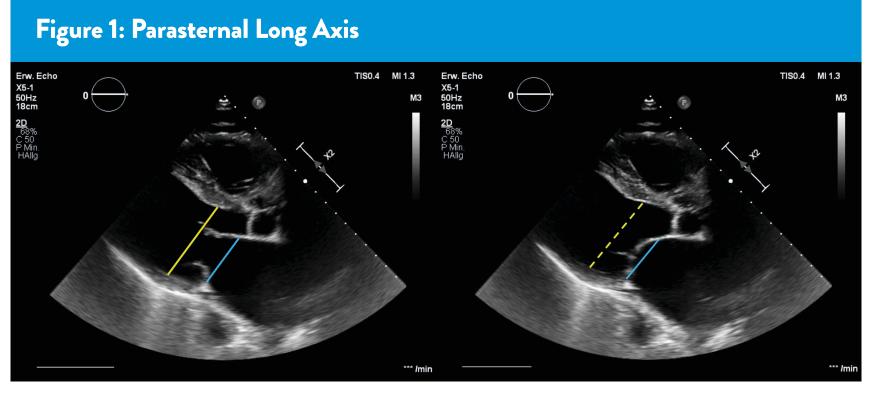
### Views with and without color:

#### **Mid-Esophageal:**

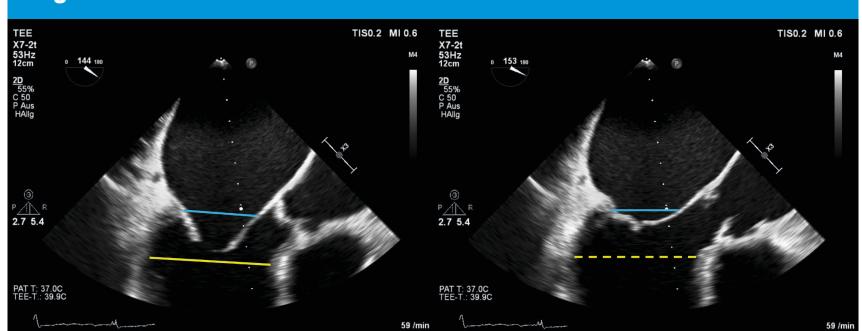
- 2 chamber view
- PLAX view (3 chamber view)
- X-plane (IC/3CH)
- Mitral 3D Enface

#### SAX:

• Mitral valve SAX

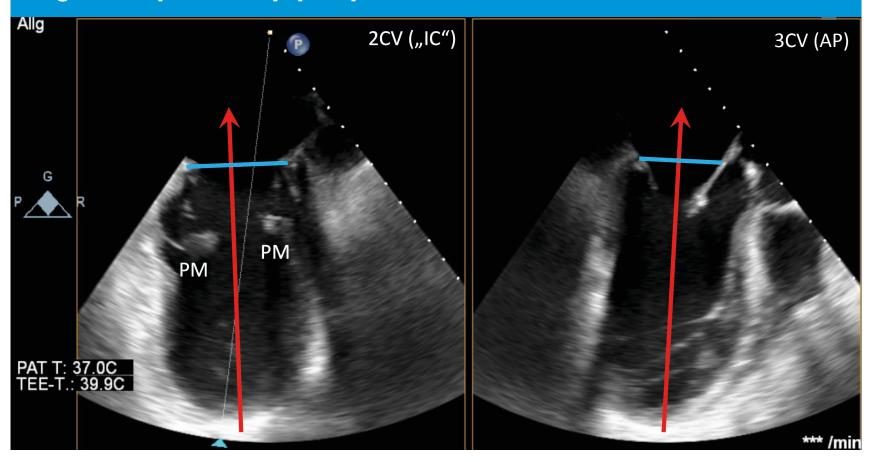


## Figure 2: 3 Chamber View



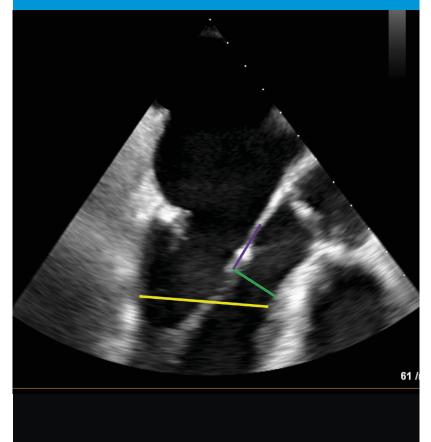
Blue Line - Anterior-Posterior (AP): Annular dimension posterior annulus to trigone (AML hinge point) - see figure 5 Yellow Solid Line: LVEDD Yellow Dotted Line: LVESD Distance between blue and yellow lines between 1.5-2cm

# Figure 3: Biplane with papillary muscle



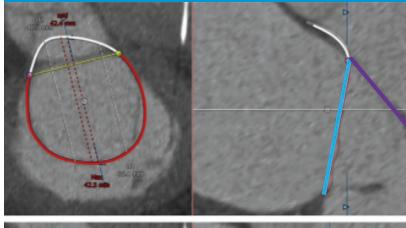
Red Arrow: Trajectory of Intervention PM: Papillary Muscle Blue Line: Annular dimensions inter-commissural (IC, left) and anterior-posterior (AP, right) Blue Line - Anterior-Posterior (AP): Annular dimension posterior annulus to trigone (AML hinge point) - see figure 5 Yellow Solid Line: LVEDD Yellow Dotted Line: LVESD Distance between blue and yellow lines between 1.5-2cm

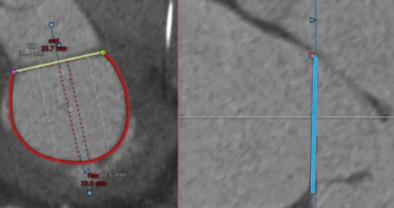
## Figure 4: Distance AML – Septum



Green Line: AML to septum shortest distance (independent of cardiac phase) Yellow Solid Line: LVEDD in diastole Purple Line: Leaflet length from hinge point to leaflet tip – see figure 5

## Figure 5: CT reference example<sup>3</sup>





Blue Line: Annular Dimensions Purple Line: Leaflet length from hinge point to leaflet tip

### **ACCEPTABLE RANGES'**

Using standard annular segmentation method: Anterior-Posterior (AP) dimension: 25 to 42 mm Inter-Commissural (IC) dimension: 35 to 48 mm

Entire perimeter: 100 to 145 mm

# → MOVE TO CT IF POTENTIAL TENDYNE<sup>™</sup> PATIENT

\* For patients with severe MR 1. TENDYNE™ Mitral Valve System IFU

2. Hahn R, et al. Guidelines for Performing a Comprehensive Transesophageal Echocardiographic Examination: Recommendations from the American Society of Echocardiography and the Society of Cardiovascular Anesthesiologists. J Am Soc Echocardiogr 2013;26:921-64. 3. Blanke P, et al. A simplified D-shaped model of the mitral annulus to facilitate CT-based sizing before transcatheter mitral valve implantation. J Cardiovasc Comput Tomogr. 2014 Nov-Dec; 8(6): 459 - 467.

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