

# Case Study Submission Requirements: Fetal Echocardiography Click to download

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# From the main site

Submit a total of <u>3 NORMAL</u> fetal echo cases showing ALL components in the <u>practice parameters</u> with their corresponding final reports as outlined below:

- <u>ALL</u> anatomic structures or designated views must be labeled (e.g. 4 chamber view, 3V-trachea view, short axis ventricles, etc.)
- <u>ALL</u> required items listed under <u>Gray Scale Imaging</u> and <u>Color Doppler Ultrasound</u> in the practice parameters must be demonstrated and labeled.
- <u>Pulsed Doppler Ultrasound:</u> evaluation of the atrioventricular valves, semilunar valves, pulmonary veins, and the ductus venosus is required.
- Heart Rate and Rhythm Assessment: M-mode evaluation of heart rate demonstrating the atria, ventricles, and their relationship to each other is required.
- <u>Cardiac Biometry</u>:
  - Biometry of the four cardiac valves is now required.
  - Additionally, for the purpose of accreditation, cardiac biometry of the following components must also be demonstrated and labeled in at least ONE of your NORMAL case submissions: the ventricular lengths, outflow tracts including the branch pulmonary arteries, atria and ventricular dimensions and cardiothoracic ratio. (See page 2 for imaging checklist.)
- <u>Video Clips</u>: In addition to the still images, the following clips are <u>required</u> (keep clips short and <u>do not send extra videos for review</u>):
  - One comprehensive clip (or 4 separate clips) of an axial sweep from stomach to 3VTV demonstrating 1.) situs, 2.) atrioventricular junction, 3.) ventriculoarterial junction, 4.) 3VV and 3VTV.

# From <u>each additional site</u> or <u>mobile unit</u>:

Submit **1 NORMAL** fetal echo case with its corresponding final report:



Refer to the description for a NORMAL case submission as described for the main site.

## And, from any site

Submit <u>1 ABNORMAL</u> fetal echo study containing a major structural congenital heart defect involving one of the 4 chambers and/or outflow tracts (e.g. HLHS, ToF, TGA, AV Canal, Ebstein anomaly, etc.) with its corresponding final report:

- For the purpose of accreditation, the following <u>ARE NOT</u> considered to be major structural anomalies: isolated arrhythmia, isolated VSD (or ASD), echogenic intracardiac focus, isolated pericardial effusion.
- <u>Video Clips</u>: In addition to the still images, the following clips are <u>required</u> (keep clips short and <u>do not send extra videos for</u> <u>review</u>):
  - One comprehensive clip (or 4 separate clips) of an axial sweep from stomach to 3VTV demonstrating 1.) situs,
    2.) atrioventricular junction,
    3.) ventriculoarterial junction,
    3VV and 3VTV.
  - Additional video clips of any salient features (positive and negative) of the cardiac pathology contributory in determining the final diagnosis.

#### **Additional Notes:**

- DO NOT SEND an unedited video of the entire exam. If your practice only stores video (and not 2D images) or if you find your cases or video files exceed 50 MB each, contact us at accreditation@aium.org for assistance.
- Refer to the Accreditation Application Manual for additional case study submission requirements.
- Only case studies with an ultrasound indication, per practice parameters, will be accepted. (Non-indicated exams will not be accepted.)

# **Imaging Checklist**

# Normal Fetal Echo Video Clips (required) - may be submitted as a single comprehensive clip of an axial sweep from stomach to 3VTV, or as 4 separate clips as listed below: ☐ 1. Short, labeled **video clip** of visceral / abdominal situs ☐ 2. Short, labeled **video clip** of atrioventricular junction □ 3. Short, labeled video clip of ventriculoarterial junction between the ventricles and the great arteries ☐ 4. Short, labeled **video clip** of the 3VV and 3VTV Labeled, still images of the following: □ 5. Four chamber ☐ 6. Left ventricular outflow tract ☐ 7. Right ventricular outflow tract □ 8. Branch pulmonary artery bifurcation ☐ 9. Three-vessel and trachea ☐ 10. Short axis views of ventricles ☐ 11. Short axis views of outflow tracts ☐ 12. Aortic arch (sagittal view) ☐ 13. Ductal arch (sagittal view) ☐ 14. SVC and IVC entering RA (bicaval view) M-Mode ☐ 15. M-mode assessment of rhythm **Doppler** ☐ 16. Color **and** spectral Doppler of the pulmonary veins (right and left) ☐ 17. Color Doppler of the foramen ovale ☐ 18. Color **and** spectral Doppler of the tricuspid valve ☐ 19. Color **and** spectral Doppler of the mitral valve ☐ 20. Color **and** spectral Doppler of the pulmonary valve ☐ 21. Color **and** spectral Doppler of the aortic valve ☐ 22. Color Doppler of the aortic arch ☐ 23. Color Doppler of the ductal arch ☐ 24. Color Doppler of the SVC and IVC $\square$ 25. Color **and** spectral Doppler of the ductus venosus Cardiac Biometry - 26, 27, 28 are REQUIRED. 29-38\*\* MUST also be demonstrated in at least ONE of your normal case submissions. ☐ 26. Aortic artery diameter at the level of the valve annulus in systole (REQUIRED) □ 27. Pulmonary artery diameter at the level of the valve annulus in systole (REQUIRED) ☐ 28. Dimensions of tricuspid and mitral valve annulus in diastole (REQUIRED) ☐ 29. Aortic and/or isthmus diameter\*\* ☐ 30. Main pulmonary artery and/or ductus arteriosus diameter\*\* □ 31. Right and left ventricular lengths\*\* ☐ 32. End-diastolic ventricular dimensions just inferior to the AV valve leaflets\*\* ☐ 33. Thickness of ventricular free walls\*\* ☐ 34. Interventricular septum just inferior to the AV valves\*\*

□ 35. Systolic dimensions of the ventricles\*\*
 □ 36. Transverse diameters of the atria\*\*

□ 38. Cardiothoracic ratio\*\*

☐ 37. Diameter of the branch pulmonary arteries\*\*

### Changes made to this document since previous version:

7/24/24	added requirement for proper exam indication
5/21/24	added link to Powerpoint case study templates