

# High-quality AE-Adult-Echocardiography Study Guide & Leader in Certification Exams Materials & Free PDF Exam AE-Adult-Echocardiography Tips

## ADULT ECHOCARDIOGRAPHY STUDY GUIDE 2024/2025 Exam All Answers and Illustrations Given

1) CALCIFIC

2) RHEUMATIC

3) CONGENITAL -  ANSWER ✓✓3 TYPES of AORTIC STENOSIS:

> 1.5 cm -  ANSWER ✓✓NORMAL MACS (Maximum Aortic Cusp

Separation) is GREATER than \_\_\_\_\_ cm

TRANSLATIONAL (when the entire heart moves) -  ANSWER ✓✓Strain  
corrects for \_\_\_\_\_ motion

CENTROID -  ANSWER ✓✓A FLOATING EPICARDIAL CENTER of  
MASS

TRUNCUS ARTERIOSUS -  ANSWER ✓✓A CHD where ONE LARGE  
GREAT VESSEL arises from the RIGHT AND LEFT VENTRICLES

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PassTorrent aims to assist its clients in making them capable of passing the ARDMS AE-Adult-Echocardiography certification exam with flying colors. It fulfills its mission by giving them an entirely free AE Adult Echocardiography Examination (AE-Adult-Echocardiography) demo of the dumps. Thus, this demonstration will enable them to scrutinize the quality of the AE Adult Echocardiography Examination (AE-Adult-Echocardiography) study material.

## ARDMS AE-Adult-Echocardiography Exam Syllabus Topics:

Topic	Details

Topic 1	<ul style="list-style-type: none"> <li>Measurement Techniques, Maneuvers, and Sonographic Views: This section of the exam measures skills of adult echocardiography technicians in performing accurate cardiac measurements, conducting provocative maneuvers, and obtaining optimized sonographic imaging views. It involves applying 2D, 3D, M-mode, and Doppler techniques to measure heart valves, chambers, and vessels, including the aortic valve, mitral valve, left and right ventricles, atria, pulmonary artery, and shunt ratios. Candidates must instruct patients in maneuvers such as Valsalva, cough, sniff, and squat. They should also be proficient in acquiring standard echocardiographic views including apical, parasternal, subcostal, and suprasternal notch views.</li> </ul>
Topic 2	<ul style="list-style-type: none"> <li>Pathology: This section of the exam measures skills of adult echocardiography technicians and focuses on identifying and evaluating abnormal physiology and perfusion and postoperative conditions. It includes assessment of ventricular aneurysms, aortic and valve abnormalities, arrhythmias, cardiac masses, diastolic dysfunction, endocarditis, ischemic diseases, cardiomyopathies, congenital anomalies, and postoperative valve repair or replacement and intracardiac devices. Candidates must demonstrate ability to recognize abnormal Doppler signals, EKG changes, wall motion abnormalities, and a wide range of cardiac pathologies including pulmonary hypertension and septal defects.</li> </ul>
Topic 3	<ul style="list-style-type: none"> <li>Anatomy and Physiology: This section of the exam measures skills of adult echocardiography technicians and covers knowledge and abilities related to normal cardiac anatomy and physiology. It includes assessing great vessels like the aorta and pulmonary arteries, recognizing anatomic variants of the heart, and evaluating cardiac chambers, pericardium, valve structures, and vessels of arterial and venous return. Candidates must document normal systolic and diastolic function, normal valve function and measurements, the phases of the cardiac cycle, normal Doppler changes with respiration, and appearance of arterial and venous waveforms. This also involves assessing the normal hemodynamic response to stress testing and maneuvers such as Valsalva, respiratory, handgrip, and postural changes.</li> </ul>
Topic 4	<ul style="list-style-type: none"> <li>Clinical Care and Safety: This section of the exam measures skills of adult echocardiography technicians in applying clinical care principles and safety protocols. It includes evaluating patient history and external data, preparing patients including fasting state and intravenous line management, proper patient positioning, EKG lead placement, blood pressure measurement, and ergonomic techniques. Candidates are expected to identify critical echocardiographic findings, know contraindications for procedures, and be able to respond and manage medical emergencies that may arise during echocardiographic exams.</li> </ul>
Topic 5	<ul style="list-style-type: none"> <li>Instrumentation, Optimization, and Contrast: This section of the exam measures skills of adult echocardiography technicians related to use and optimization of ultrasound instrumentation and the application of contrast agents. Candidates should recognize imaging artifacts, utilize non-imaging transducers, and adjust ultrasound console settings for optimal imaging and Doppler recordings. Knowledge of harmonic imaging, principles of contrast agents, and the safe and effective use of saline and echo-enhancing contrast agents is essential. Candidates must also be able to optimize images when using contrast agents to ensure diagnostic quality.</li> </ul>

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## **Exam AE-Adult-Echocardiography Tips, AE-Adult-Echocardiography Reliable Exam Prep**

Experts at PassTorrent have also prepared ARDMS AE-Adult-Echocardiography practice exam software for your self-assessment. This is especially handy for preparation and revision. You will be provided with an examination environment and you will be presented with actual exam ARDMS AE-Adult-Echocardiography Exam Questions. This sort of preparation method enhances your knowledge which is crucial to excelling in the actual ARDMS AE-Adult-Echocardiography certification exam.

## **ARDMS AE Adult Echocardiography Examination Sample Questions (Q112-Q117):**

### **NEW QUESTION # 112**

Which is most likely the culprit coronary artery in a patient who presents with anteroseptal hypokinesis?

- A. Circumflex artery
- **B. Left coronary artery**
- C. Right coronary artery
- D. Posterior descending artery

**Answer: B**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Anteroseptal hypokinesis is most often due to ischemia or infarction in the left anterior descending (LAD) artery territory, a major branch of the left coronary artery. The LAD supplies the anterior wall and the interventricular septum.

The right coronary artery generally supplies the inferior wall and right ventricle. The circumflex artery supplies the lateral wall. The posterior descending artery supplies the inferior wall.

This coronary artery distribution and wall motion correlation is fundamental in stress echocardiography and ischemic heart disease assessment as detailed in ASE guidelines and clinical echocardiography references#12:

ASE Stress Echocardiography Guidelinesp.300-310##16:Textbook of Clinical Echocardiography, 6ep.380-385#.

**NEW QUESTION # 113**

Which coronary artery territory is associated with the wall motion abnormality demonstrated in this video?

□

- A. Left anterior descending
- **B. Left circumflex**
- C. Right
- D. Posterior descending

**Answer: B**

Explanation:

The echocardiographic video shows hypokinesis or akinesis of the inferolateral wall of the left ventricle. This myocardial territory is predominantly supplied by the left circumflex coronary artery.

The right coronary artery primarily supplies the inferior wall and right ventricle. The left anterior descending artery supplies the anterior and septal walls. The posterior descending artery supplies the inferior wall, usually supplied by the right coronary artery or sometimes the circumflex.

These segmental coronary territories are described in ASE stress echocardiography and regional wall motion assessment guidelines#12:ASE Stress Echocardiography Guidelinesp.300-310##16:Textbook of Clinical Echocardiography, 6ep.380-385#.

**NEW QUESTION # 114**

Which congenital abnormality is most consistent with the findings in this video?

- A. Patent foramen ovale
- **B. Ebstein anomaly**
- C. Eisenmenger syndrome
- D. Ventricular septal defect

**Answer: B**

Explanation:

The video shows an apical four-chamber or subcostal echocardiographic view demonstrating a markedly enlarged right atrium with atrialization of part of the right ventricle, displacement of the tricuspid valve septal leaflet downward into the RV cavity, and severe tricuspid regurgitation. These findings are hallmark features of Ebstein anomaly, a congenital malformation of the tricuspid valve causing apical displacement of the septal and posterior leaflets.

Patent foramen ovale and ventricular septal defects have different echocardiographic features without tricuspid leaflet displacement. Eisenmenger syndrome refers to advanced pulmonary hypertension due to shunts but is not a specific congenital structural abnormality.

These diagnostic criteria and echocardiographic hallmarks are described in adult congenital heart disease literature and echocardiography textbooks#16:Textbook of Clinical Echocardiography, 6ep.570-575##12:

ASE Adult Congenital Guidelinesp.400-405#.

### NEW QUESTION # 115

What is the range of the aortic valve area in normal adults?

- A. 3 - 4cm<sup>2</sup>
- B. 7- 8cm<sup>2</sup>
- C. 1 - 2 cm<sup>2</sup>
- D. 5 - 6cm<sup>2</sup>

**Answer: A**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

The normal aortic valve area (AVA) in adults typically ranges from 3 to 4 cm<sup>2</sup>. This measurement is important for assessing aortic stenosis severity; values below this range suggest valve narrowing.

AVA values of 1-2 cm<sup>2</sup> indicate mild to moderate stenosis, while less than 1 cm<sup>2</sup> reflects severe stenosis.

Larger areas like 5-6 or 7-8 cm<sup>2</sup> are not physiologically typical.

This normal range is documented in the "Textbook of Clinical Echocardiography, 6e", Chapter on Aortic Valve Anatomy and Function#20:360-365Textbook of Clinical Echocardiography#.

### NEW QUESTION # 116

Which type of valvular lesion most commonly requires further evaluation with a non-imaging transducer?

- A. Mitral regurgitation
- B. Aortic stenosis
- C. Pulmonic stenosis
- D. Tricuspid regurgitation

**Answer: B**

Explanation:

Aortic stenosis (AS) is the valvular lesion most commonly requiring evaluation with a non-imaging (pedoff) continuous wave Doppler transducer. This specialized probe allows the operator to align the Doppler beam parallel to high-velocity aortic jets to accurately measure peak and mean gradients across the stenotic aortic valve.

While imaging Doppler can estimate gradients, non-imaging CW Doppler is essential for precise quantification, especially in difficult acoustic windows or when maximal velocities need to be captured.

Mitral and tricuspid regurgitations and pulmonic stenosis are typically assessed with imaging transducers, as jet orientation is more variable.

This is highlighted in the "Textbook of Clinical Echocardiography, 6e", Chapter on Doppler Hemodynamics and Valvular Stenosis Assessment#20:310-315Textbook of Clinical Echocardiography#.

### NEW QUESTION # 117

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These questions will familiarize you with the AE-Adult-Echocardiography exam format and the content that will be covered in the actual test. You will not get a passing score if you rely on outdated practice questions. PassTorrent has assembled a brief yet concise study material that will aid you in acing the AE Adult Echocardiography Examination (AE-Adult-Echocardiography) exam on the first attempt. This prep material has been compiled under the expert guidance of 90,000 experienced ARDMS professionals from around the globe.

**Exam AE-Adult-Echocardiography Tips:** <https://www.passtorrent.com/AE-Adult-Echocardiography-latest-torrent.html>

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