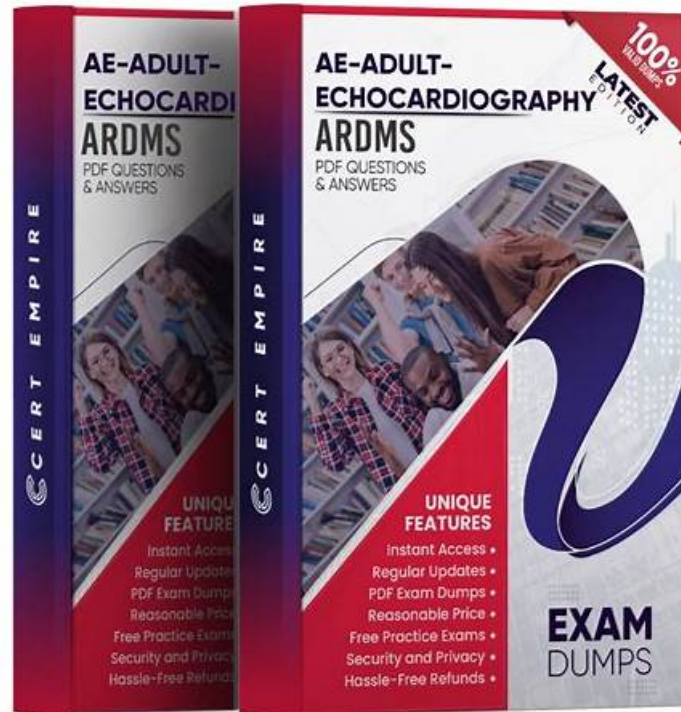


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ARDMS AE-Adult-Echocardiography Exam Syllabus Topics:

Topic	Details
Topic 1	<ul style="list-style-type: none"> • 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.
Topic 2	<ul style="list-style-type: none"> • 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.
Topic 3	<ul style="list-style-type: none"> • 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.
Topic 4	<ul style="list-style-type: none"> • 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.
Topic 5	<ul style="list-style-type: none"> • 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.

ARDMS AE Adult Echocardiography Examination Sample Questions (Q85-Q90):

NEW QUESTION # 85

Which pathology is demonstrated in this video clip?

- A. Isolated left ventricular noncompaction
- B. Apical hypertrophic cardiomyopathy
- C. Amyloidosis
- D. Sarcoidosis

Answer: A

Explanation:

The video shows prominent trabeculations with deep intertrabecular recesses communicating with the left ventricular cavity, characteristic of isolated left ventricular noncompaction (LVNC). This congenital cardiomyopathy features a spongy myocardial appearance with thickened noncompacted layers.

Amyloidosis typically presents with thickened, bright myocardium but without prominent trabeculations.

Sarcoidosis involves granulomatous inflammation, and apical hypertrophic cardiomyopathy shows localized hypertrophy without trabecular changes.

This pathology is detailed in the "Textbook of Clinical Echocardiography, 6e", Chapter on Cardiomyopathies and Myocardial Disorders#20:360-365Textbook of Clinical Echocardiography#.

NEW QUESTION # 86

Which of the following is the gold standard for assessment of coronary artery disease?

- A. Cardiac magnetic resonance imaging
- **B. Cardiac catheterization**
- C. Myocardial perfusion imaging
- D. Stress echocardiography

Answer: B

Explanation:

Cardiac catheterization with coronary angiography is considered the gold standard for the assessment and diagnosis of coronary artery disease (CAD). It provides direct visualization of coronary artery luminal stenosis and allows for therapeutic intervention if needed.

While cardiac magnetic resonance imaging (MRI), stress echocardiography, and myocardial perfusion imaging are valuable non-invasive modalities for ischemia detection and functional assessment, none replace the anatomical and interventional capabilities of invasive angiography.

This is well established in the "Textbook of Clinical Echocardiography, 6e", Chapter on Ischemic Heart Disease and Diagnostic Modalities#20:400-405Textbook of Clinical Echocardiography#.

NEW QUESTION # 87

Mid to distal septal akinesis in post-stress imaging of the apical four-chamber view is suggestive of disease in which coronary artery?

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

Answer: A

Explanation:

The mid to distal interventricular septum is supplied predominantly by the left anterior descending (LAD) coronary artery. Post-stress echocardiography showing akinesis or hypokinesis of these segments is highly suggestive of ischemia or infarction in the LAD territory.

The posterior descending artery supplies the inferior wall, the obtuse marginal supplies lateral walls, and the left circumflex supplies lateral and posterior walls.

This coronary artery segmental relationship is a cornerstone of ischemic heart disease evaluation by stress echocardiography and is well documented in ASE guidelines and clinical echocardiography literature#16:

Textbook of Clinical Echocardiography, 6ep.380-385##12:ASE Stress Echocardiography Guidelinesp.300-310#.

NEW QUESTION # 88

Which valvular pathology is illustrated in this left heart pressure tracing?

- **A. Mitral stenosis**
- B. Mitral regurgitation
- C. Aortic stenosis
- D. Aortic regurgitation

Answer: A

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

The pressure tracing shows left atrial (LA), left ventricular (LV), and aortic (AO) pressures over time. The key feature is the large pressure gradient between the LA and LV during diastole (arrow pointing at early diastolic phase), where the LA pressure is elevated and there is a delayed, gradual rise in LV pressure during diastolic filling. This finding is typical of mitral stenosis, where obstruction at the mitral valve causes increased LA pressure and a pressure gradient between LA and LV during diastole. In aortic stenosis, the pressure gradient is primarily between LV and AO during systole. Mitral regurgitation shows elevated LA pressure but not a diastolic gradient. Aortic regurgitation shows elevated LV diastolic pressure with aortic diastolic pressure falling. These characteristic hemodynamic patterns are described in clinical cardiology and echocardiography literature and hemodynamic references such as the "Textbook of Clinical Echocardiography" and cardiac catheterization textbooks#16:Textbook of Clinical Echocardiography, 6p.360-365##12:Hemodynamic Textsp.50-60#.

NEW QUESTION # 89

Which echocardiography assessment requires mitral inflow pulsed wave, pulmonary venous pulsed wave, and tissue Doppler of the mitral annulus?

- A. Myocardial performance index
- B. Left ventricular systolic function
- C. Left ventricular diastolic function
- D. Mitral regurgitation severity

Answer: C

Explanation:

Assessment of left ventricular diastolic function by echocardiography involves evaluating mitral inflow velocities with pulsed wave Doppler (E and A waves), pulmonary venous flow patterns (systolic and diastolic waves), and tissue Doppler imaging of the mitral annulus to measure early diastolic (e') velocities.

This combination allows differentiation of normal versus abnormal relaxation, elevated filling pressures, and grading of diastolic dysfunction. The myocardial performance index evaluates global ventricular function but does not specifically require these Doppler measures. Systolic function is assessed mainly by ejection fraction and wall motion. Mitral regurgitation severity uses color Doppler and vena contracta measurements.

This multiparameter diastolic function evaluation is outlined in the "Textbook of Clinical Echocardiography, 6e", Chapter on Diastolic Function Assessment#20:210-220Textbook of Clinical Echocardiography#.

NEW QUESTION # 90

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