

# AE-Adult-Echocardiography Valid Test Answers, AE-Adult-Echocardiography Practice Online

## Adult Echocardiography Practice Exam #1 Questions and Answers

Inferior vena cava, superior vena cava, & hepatic veins demonstrate systolic flow reversal. What type of valve abnormality would you expect to see?

- A. mild mitral regurgitation
- B. severe mitral regurgitation
- C. mild tricuspid regurgitation
- D. severe tricuspid regurgitation - Answer- D

When estimating pulmonary artery pressure, the most reliable non-invasive method is:

- A. tricuspid valve regurgitant jet velocity
- B. pulmonic valve systolic velocity
- C. pulmonary artery catheter
- D. thermodilution - Answer- D

Which statement is correct about frequency?

- A. higher frequency transducers decrease the depth of penetration, but reduce image resolution
- B. low frequency transducers decrease the depth penetration, but increase image resolution
- C. higher frequency transducers increase the depth of penetration & improve image resolution
- D. low frequency transducers improve depth penetration, but reduce image resolution - Answer- D

Mitral valve prolapse may be augmented by:

- A. having the patient lie very flat
- B. having the patient perform a valsalva maneuver
- C. having the patient inhale
- D. injecting contrast into the venous system - Answer- B

Which chamber is the more posterior?

- A. right ventricle
- B. left atrium
- C. left ventricle
- D. right atrium - Answer- B

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No matter how much you study, it can be difficult to feel confident going into the AE Adult Echocardiography Examination (AE-Adult-Echocardiography) exam. However, there are a few things you can do to help ease your anxiety and boost your chances of success. First, make sure you prepare with real ARDMS AE-Adult-Echocardiography Exam Dumps. If there are any concepts you're unsure of, take the time to take AE-Adult-Echocardiography Practice Exams until you feel comfortable. Buy AE Adult Echocardiography Examination (AE-Adult-Echocardiography) preparation material from a trusted company such as ExamDiscuss. This will ensure you get updated AE Adult Echocardiography Examination (AE-Adult-Echocardiography) study material to cover everything before the big day.

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

Topic	Details

Topic 1	<ul style="list-style-type: none"> <li>• <b>Anatomy and Physiology:</b> 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 2	<ul style="list-style-type: none"> <li>• <b>Measurement Techniques, Maneuvers, and Sonographic Views:</b> 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 3	<ul style="list-style-type: none"> <li>• <b>Clinical Care and Safety:</b> 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 4	<ul style="list-style-type: none"> <li>• <b>Pathology:</b> 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 5	<ul style="list-style-type: none"> <li>• <b>Instrumentation, Optimization, and Contrast:</b> 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>

>> AE-Adult-Echocardiography Valid Test Answers <<

## Quiz 2026 ARDMS AE-Adult-Echocardiography: AE Adult Echocardiography Examination Latest Valid Test Answers

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## ARDMS AE Adult Echocardiography Examination Sample Questions (Q130-Q135):

### NEW QUESTION # 130

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

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

**Answer: A**

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 # 131

Which parameter is expected to increase in the presence of cardiac tamponade?

- **A. Heart rate**
- B. Systolic blood pressure
- C. Diastolic blood pressure
- D. Oxygen saturation

**Answer: A**

Explanation:

In cardiac tamponade, pericardial fluid accumulation restricts cardiac filling leading to decreased stroke volume and cardiac output. As a compensatory mechanism, the heart rate increases (tachycardia) to maintain cardiac output.

Oxygen saturation typically does not increase; it may be normal or decreased if tamponade leads to hypoperfusion. Systolic and diastolic blood pressures often decrease due to reduced cardiac output.

This physiological response is well described in clinical cardiology texts and ASE pericardial disease guidelines#12:ASE Pericardial Disease Guidelinesp.300-305##16:Textbook of Clinical Echocardiography, 6ep.280-285#

#### NEW QUESTION # 132

Which of the following is commonly evaluated by the sniff maneuver?

- A. Left atrial pressure
- B. Left ventricular outflow tract obstruction
- **C. Right atrial pressure**
- D. Right ventricular outflow tract obstruction

**Answer: C**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

The sniff maneuver is commonly used in echocardiography to assess right atrial pressure (RAP) indirectly by observing changes in the size and collapsibility of the inferior vena cava (IVC). During a sniff or rapid inspiration, negative intrathoracic pressure normally causes the IVC to collapse. The degree of IVC collapse during the sniff test correlates with RAP.

If the IVC is dilated and fails to collapse significantly with a sniff, this suggests elevated right atrial pressure, which can be caused by right heart failure, pulmonary hypertension, or volume overload.

This maneuver is not used to evaluate left atrial pressure or outflow tract obstructions, which require other echocardiographic parameters.

This assessment method is described in the "Textbook of Clinical Echocardiography, 6e", Chapter on Right Heart Evaluation and Hemodynamics#20:300-305Textbook of Clinical Echocardiography#.

### NEW QUESTION # 133

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

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

**Answer: C**

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 # 134

Which condition is most likely demonstrated by this M-mode image?

- A. Hypertrophic cardiomyopathy
- B. Dilated cardiomyopathy
- C. Mitral valve prolapse
- D. Mitral stenosis

**Answer: D**

Explanation:

The M-mode image shows characteristic diastolic doming or "hockey stick" appearance of the anterior mitral leaflet with restricted leaflet motion. This is a classic sign of mitral stenosis, where leaflet thickening and fusion cause limited opening during diastole.

Dilated cardiomyopathy shows increased chamber sizes and decreased systolic function but not mitral leaflet doming. Hypertrophic cardiomyopathy is characterized by septal thickening and SAM of the mitral valve.

Mitral valve prolapse shows leaflet billowing into the left atrium during systole.

This pattern is well described in ASE valvular heart disease guidelines and echocardiography texts#12:ASE Valve Imaging Guidelines.180-185##16:Textbook of Clinical Echocardiography, 6e.200-205#.

### NEW QUESTION # 135

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