Figura 1

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| --- | --- |
| Insuficiencia mitral funcional | Functional mitral regurgitation |
| Profundidad de coaptacion | Coaptation depth |
| Longitud de coaptacion |  Coaptation length |
| Plano 4 camaras donde profundad copatacion es mayor | 4-chamber view where coaptation depth is greatest |
| Plano 4 camaras donde profundad copatacion es menor | 4-chamber view where coaptation depth is shallowest |
| Insuficiencia mitral degenerativa | Degenerative mitral regurgitation |
| Separacion velos | Flail |
| Anchura area flail | Flail width |
| Plano LAX, 4C, 5C donde separacion velos es mayor | LAX 4-C, 5-C view where flail is greatest |
| Plano transgastrico eje corto donde anchura area de flail es mayor | Transgastric short axis view where flail width is greatest  |

Figura 15

Differential diagnosis in postcardiotomy shock

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| New/Persistent segmental ventricular motility abnormalities | Ventricular dysfunction (LV, RV or biventricular) | *De novo* anatomical defect | Prosthetic valveValve repair |
|  |  |  |  |
| - Coronary spasm- Air embolism- Stenotic coronary anastomosis- Mechanical obstruction of graft- Coronary embolism due to calcium mobilisation | - Stunned myocardium- Incomplete coronary bypass- Poor myocardial protection | - Dynamic obstruction of the LV outflow tract- Atrial/ventricular septal defect- Iatrogenic dissection of ascending aorta | - Periprosthetic leakage- Prosthetic malfunction causing leakage- Significant regurgitation- Mechanical obstruction of circumflex artery- Coronary embolism due to calcium mobilisation |