

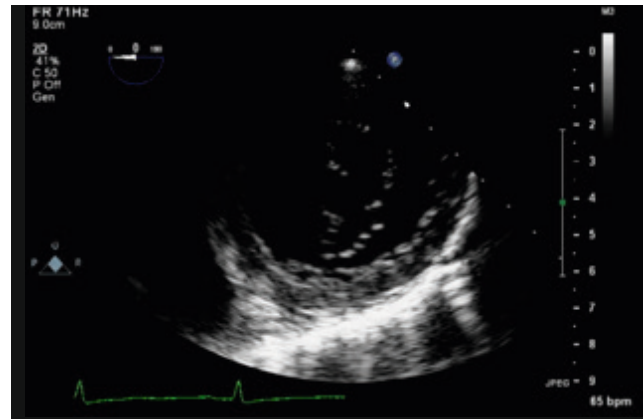
TEE ESSENTIALS

How to get the views: Transgastric views

In their recommendations for performing TEE, the American Society of Echocardiography and the Society of Cardiovascular Anesthesiologists identify nine distinct transgastric views:

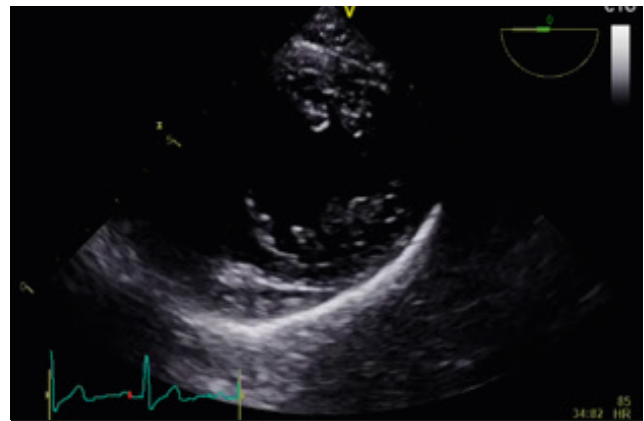
Transgastric basal short-axis view

The transgastric basal short-axis view, which includes the basal left ventricle and mitral valve (seen en face), is performed at a transducer angle of 0–20°. The anterior mitral leaflet is on the left of the screen, and the posterior mitral leaflet is on the right.



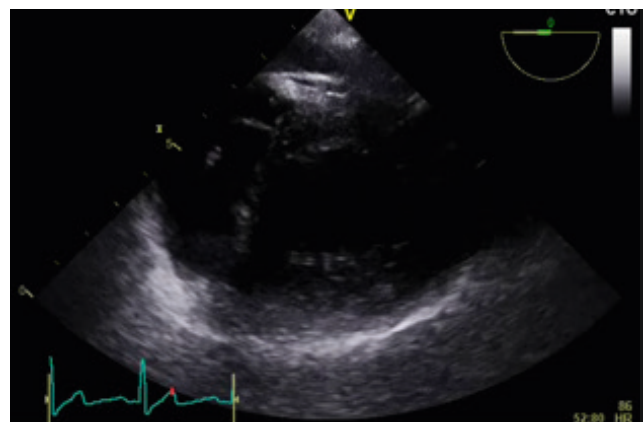
Transgastric mid-papillary short-axis view

The transgastric mid-papillary short-axis view shows the left ventricle at its mid-cavity level and is performed at a transducer angle of 0–20°. This view shows left ventricular myocardial segments that are supplied by all three coronary arteries simultaneously, and is therefore often used for intraoperative monitoring of left ventricular size and function.



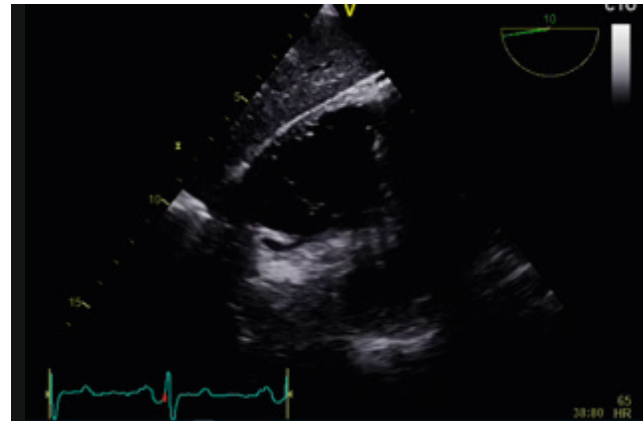
Transgastric apical short-axis view

The transgastric apical short-axis view, obtained at a transducer angle of 0–20°, shows the apical portions of both the left and right ventricles.



Transgastric right ventricular basal view

The transgastric right ventricular basal view is performed at a transducer angle of 0–20° and with the probe turned towards the patient's right. This view shows all three tricuspid valve segments in short axis.



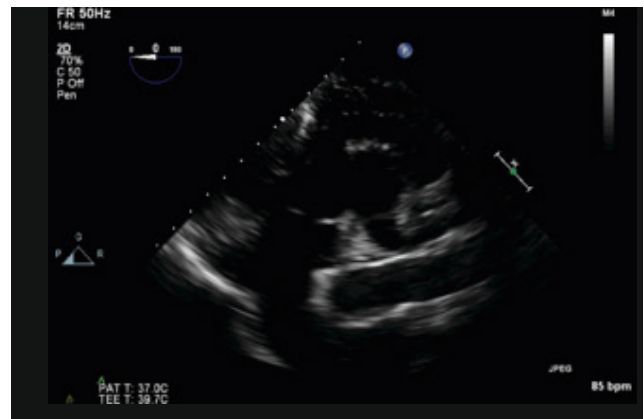
Transgastric right ventricular inflow-outflow view

The transgastric right ventricular inflow-outflow view is one of the most challenging TEE views to acquire, and usually requires right flexion of the probe tip and a transducer angle of 0–20°. This view shows both the tricuspid and pulmonary valves.



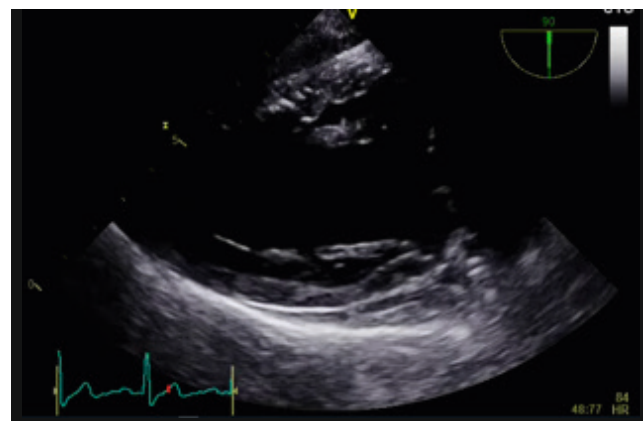
Deep transgastric five-chamber view

The deep transgastric five-chamber view is performed by advancing the probe to the deep transgastric position and anteflexing the tip (left flexion may also be necessary) at a transducer angle of 0–20°. This view is useful for the Doppler assessment of flow through the left ventricular outflow tract and aortic valve.



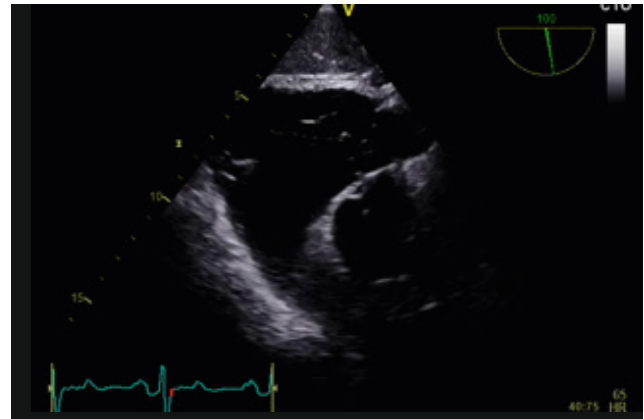
Transgastric two-chamber view

The transgastric two-chamber view is performed at a transducer angle of 90–110° and shows the inferior (near field) and anterior (far field) walls of the left ventricle, and also the mitral valve. The subvalvular apparatus is seen particularly clearly.



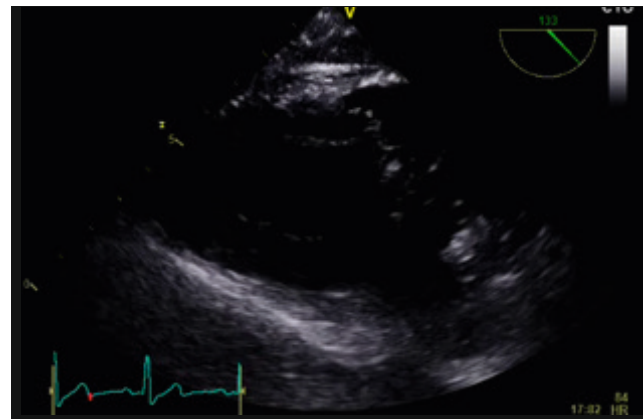
Transgastric right ventricular inflow view

The transgastric right ventricular inflow view is performed at a transducer angle of 90–110° and with the probe turned towards the patient's right. This view is useful for examining the tricuspid valve with its papillary muscles and chordae tendineae.



Transgastric long-axis view

The transgastric long-axis view is performed at a transducer angle of 120–140° and is similar to the mid-esophageal long-axis view, but provides more optimal alignment with the left ventricular outflow tract and aortic valve for Doppler assessment of flow.



Further reading

Hahn RT, Abraham T, Adams MS, et al. 2013. Guidelines for performing a comprehensive transesophageal echocardiographic examination: Recommendations from the American Society of Echocardiography and the Society of Cardiovascular Anesthesiologists. *J Am Soc Echocardiogr.* **26**: 921–964.