

# FISTOLE CORONARO – POLMONARE: DAL SOSPETTO ECO ALLA DIAGNOSI

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**ECOCARDIOGRAFIA 2015**  
**XVII Congresso Nazionale SIEC**  
**Hotel Royal Continental**  
**Napoli, 16-18 Aprile 2015**

- Donna, 60 anni
- Dispnea da sforzo lieve

# ECOCARDIOGRAMMA TRANSTORACICO

PHILIPS

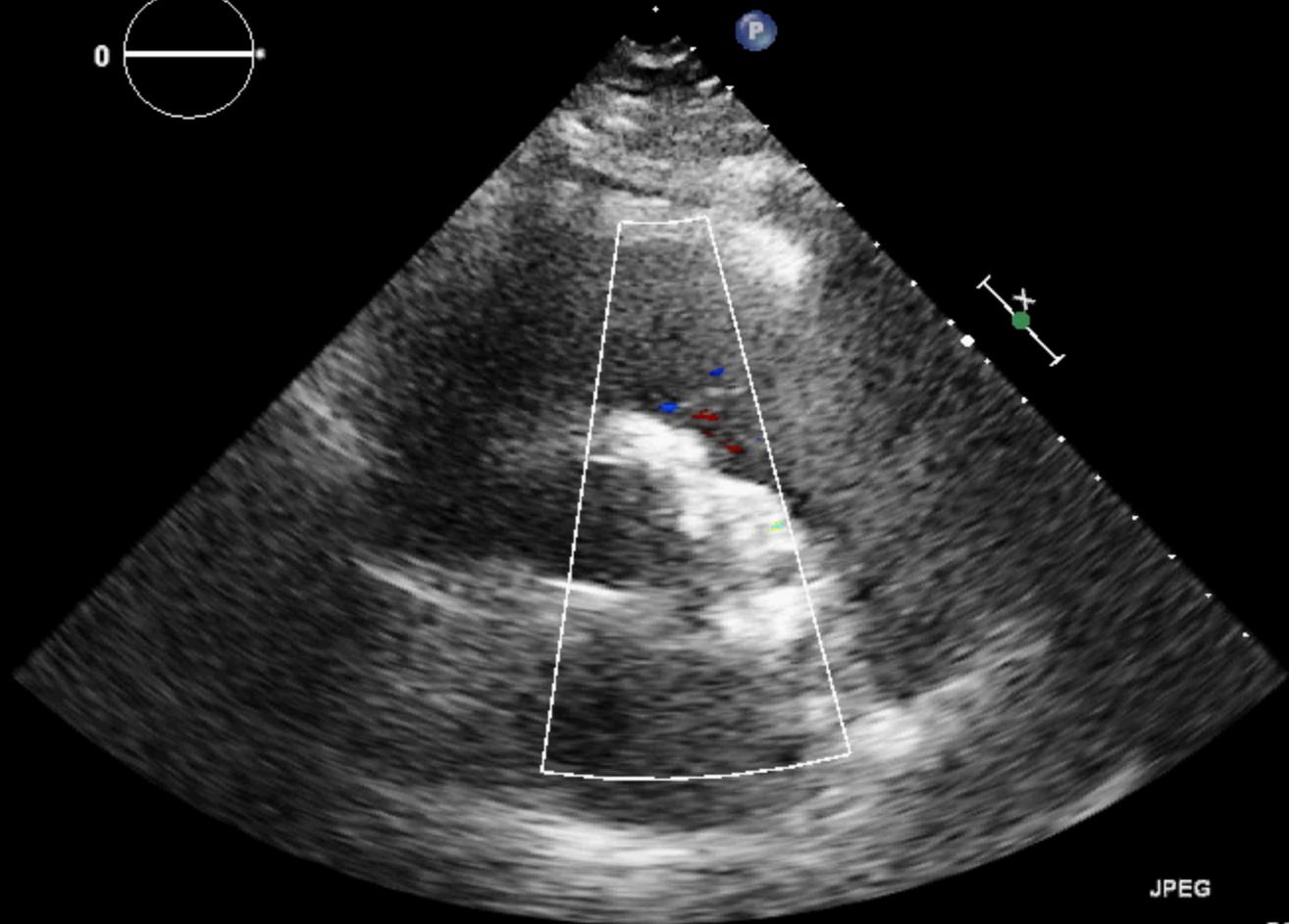
TISO.6 MI 0.9

X5-1/AMC

FR 20Hz  
17cm

2D  
60%  
C 50  
P Bassa  
AGen

CF  
63%  
2.5MHz  
WF Alto  
Med.



JPEG

56 bpm

PHILIPS

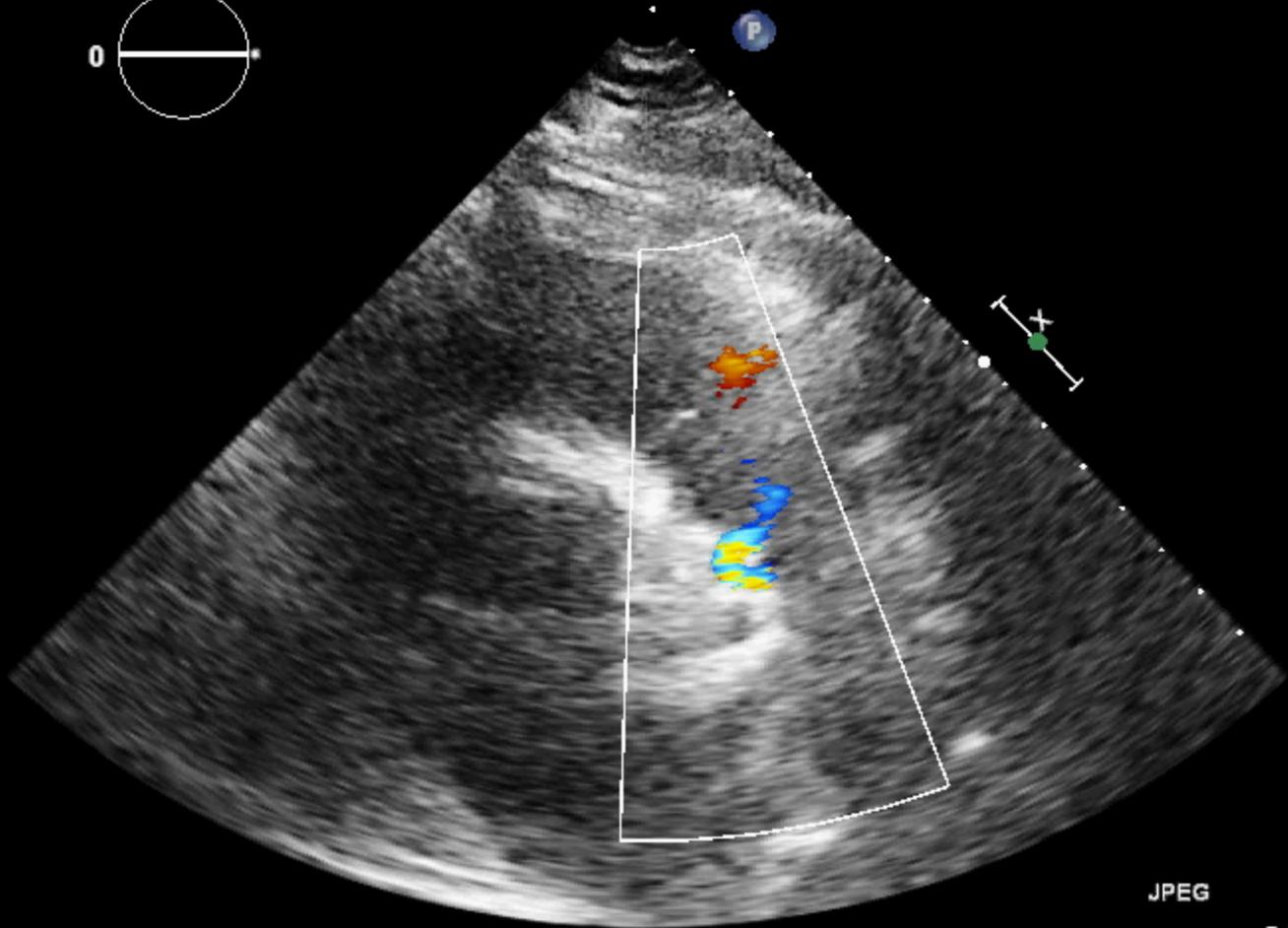
TIS0.6 MI 0.9

X5-1/AMC

FR 21Hz  
16cm

2D  
60%  
C 50  
P Bassa  
AGen

CF  
63%  
2.5MHz  
WF Alto  
Med.



JPEG

54 bpm

PHILIPS

TIS0.7 MI 1.4

S5-1/Coronarie

FR 66Hz  
16cm

M3

2D  
58%  
C 50  
P Med.  
AGen

P



JPEG

55 bpm

PHILIPS

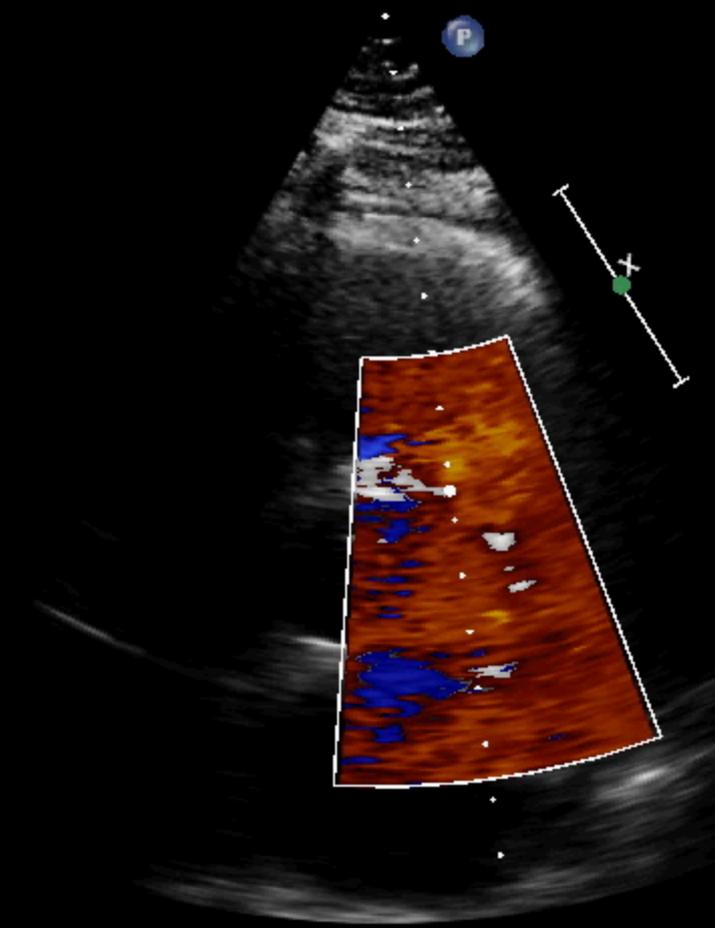
TIS1.5 MI 1.1

S5-1/Coronarie

FR 24Hz  
16cm

2D  
56%  
C 50  
P Med.  
AGen

CF  
72%  
3.3MHz  
WF Med.  
Alto



JPEG

54 bpm

# ECOCARDIOGRAMMA TRANSESOFAGEO

PHILIPS

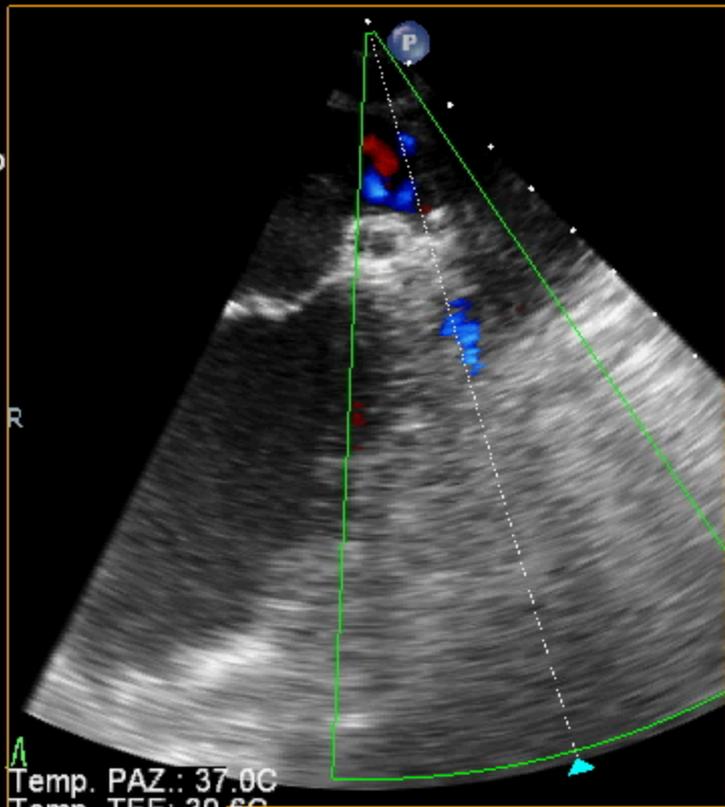
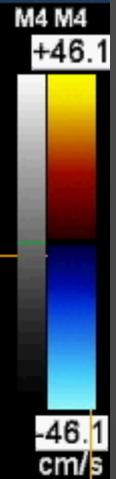
TIS0.7 MI 0.5

CX7-2t/Adulti

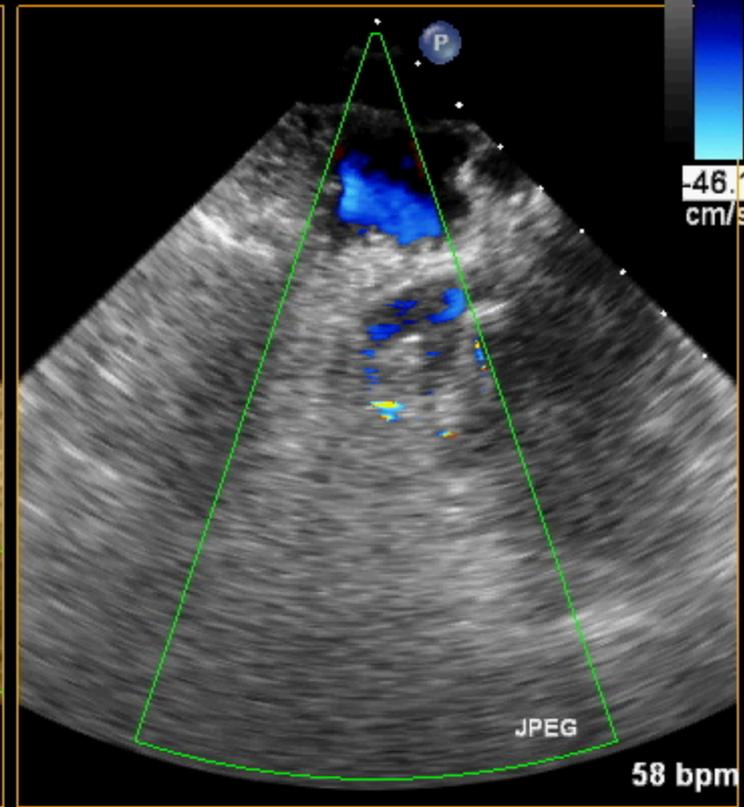
FR 9Hz  
13cm

xPlane  
79%  
79%  
50dB  
P Off  
Gen.

CF  
59%  
4.4MHz  
WF Alto  
Med.



Temp. PAZ.: 37.0C  
Temp. TEE: 39.6C



58 bpm

PHILIPS

TIS0.7 MI 0.5

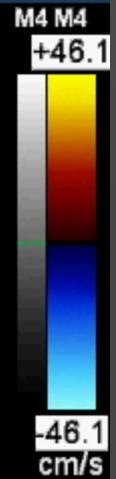
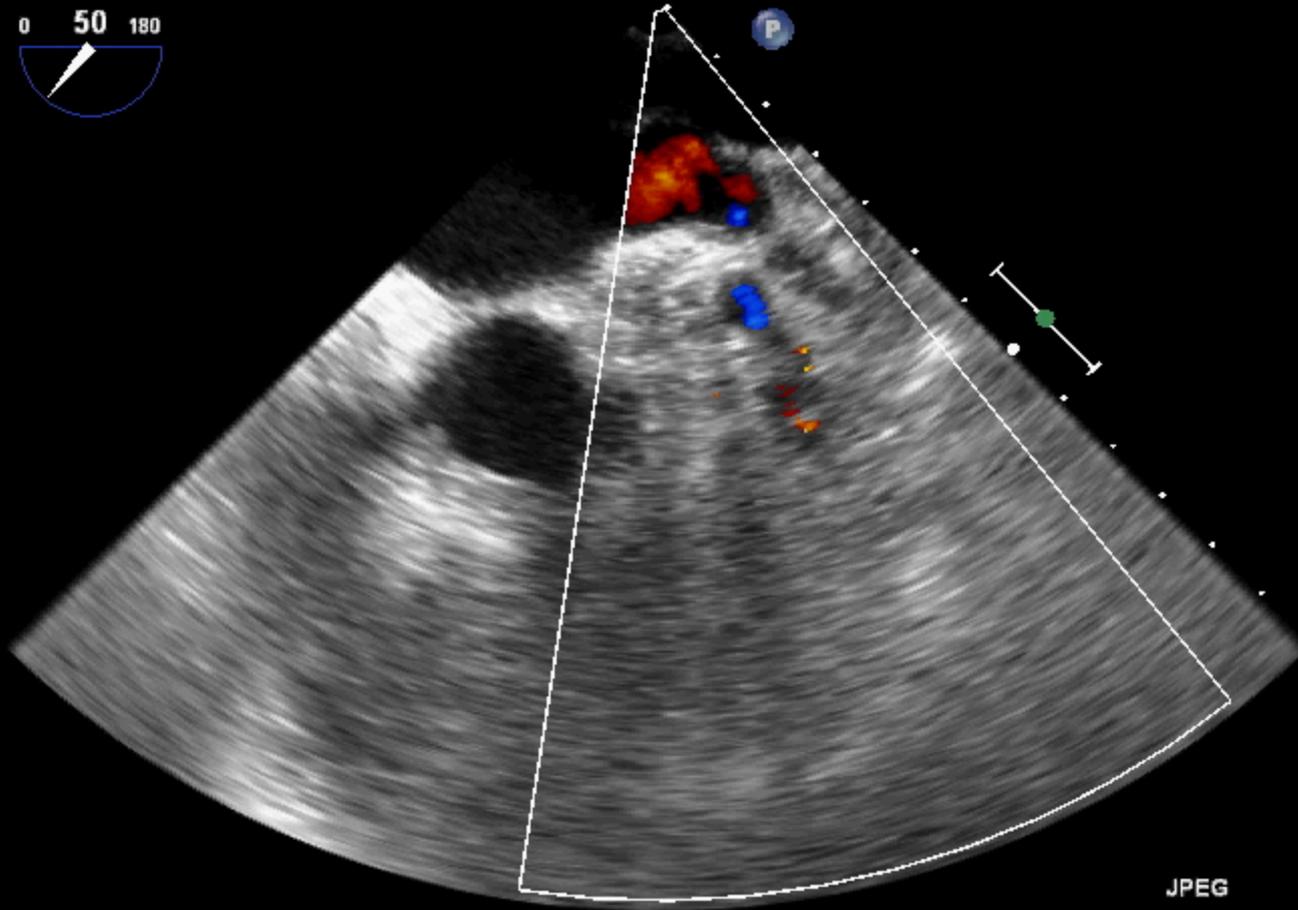
CX7-2t/Adulti

FR 14Hz  
13cm

2D  
79%  
C 50  
P Off  
Gen.



CF  
59%  
4.4MHz  
WF Alto  
Med.



Temp. PAZ.: 37.0C  
Temp. TEE: 39.8C

JPEG

55 bpm

PHILIPS

TIS0.7 MI 0.6

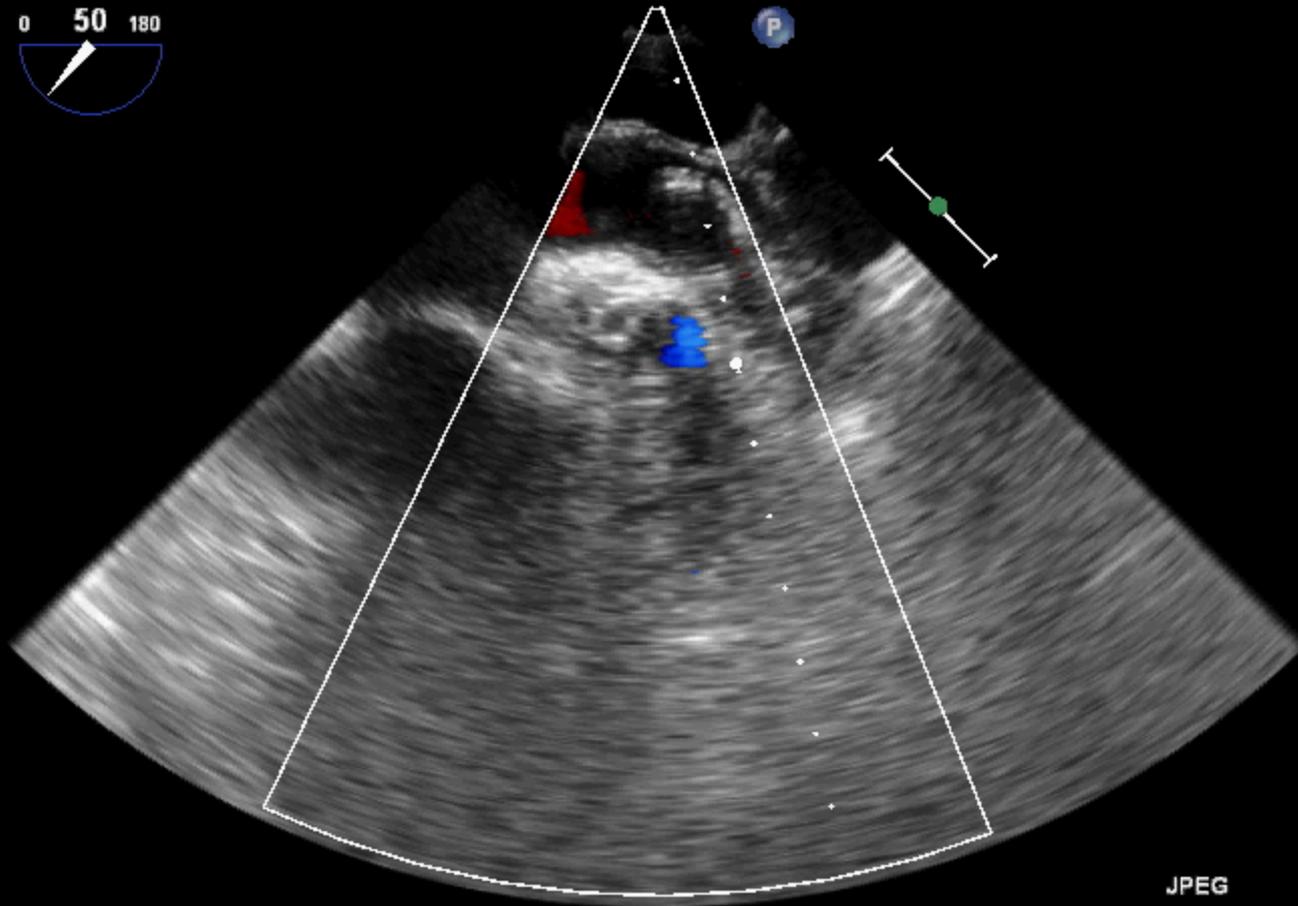
CX7-2t/Adulti

FR 15Hz  
12cm

2D  
78%  
C 50  
P Off  
Gen.



CF  
59%  
4.4MHz  
WF Alto  
Med.



Temp. PAZ.: 37.0C  
Temp. TEE: 39.7C

JPEG

52 bpm

PHILIPS

TIS0.7 MI 0.6

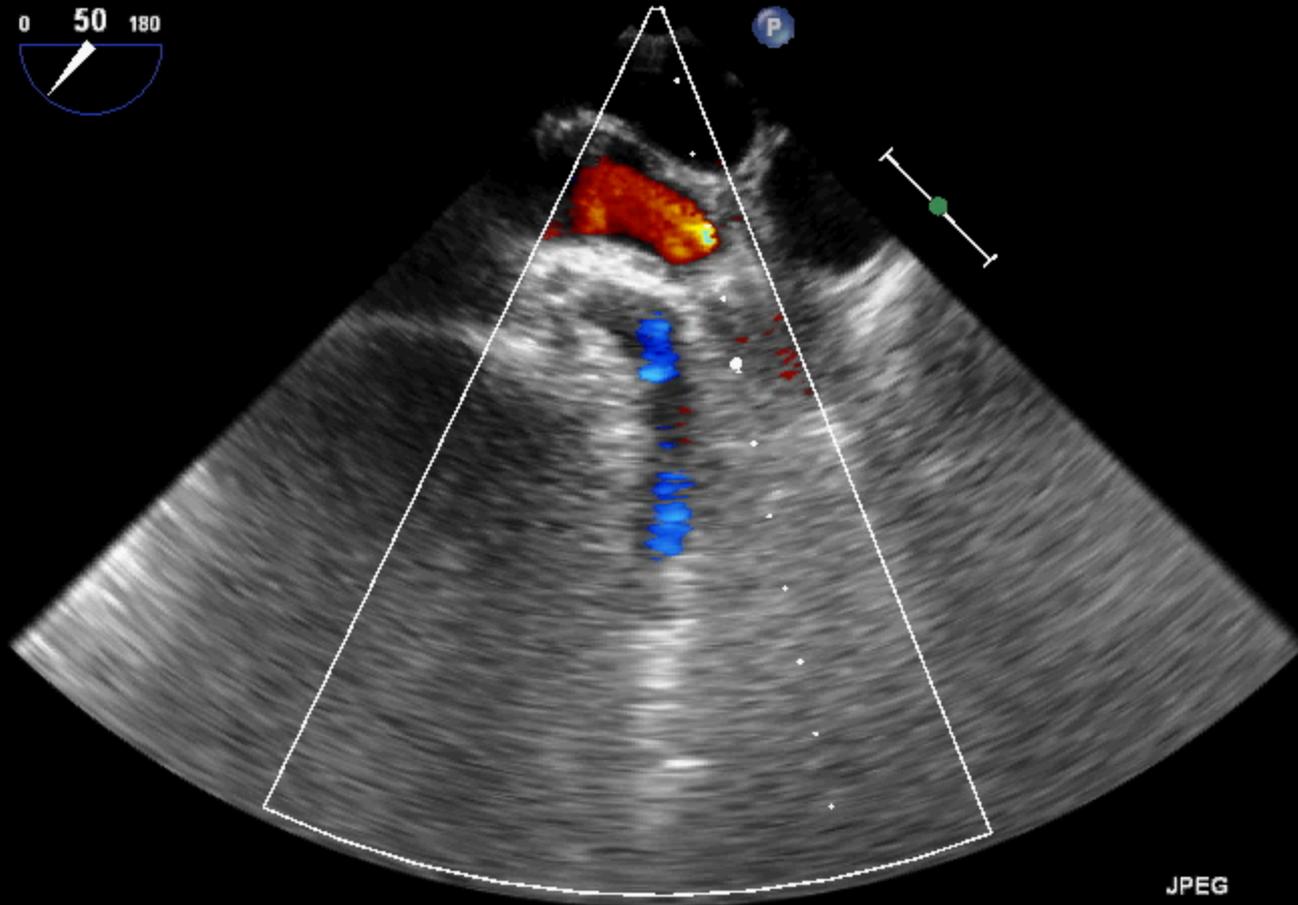
CX7-2t/Adulti

FR 15Hz  
12cm

2D  
79%  
C 50  
P Off  
Gen.



CF  
59%  
4.4MHz  
WF Alto  
Med.



Temp. PAZ.: 37.0C  
Temp. TEE: 40.1C

JPEG

50 bpm

PHILIPS

TIS0.7 MI 0.6

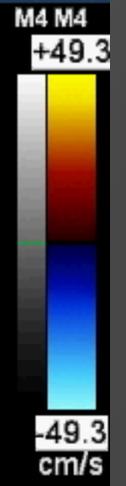
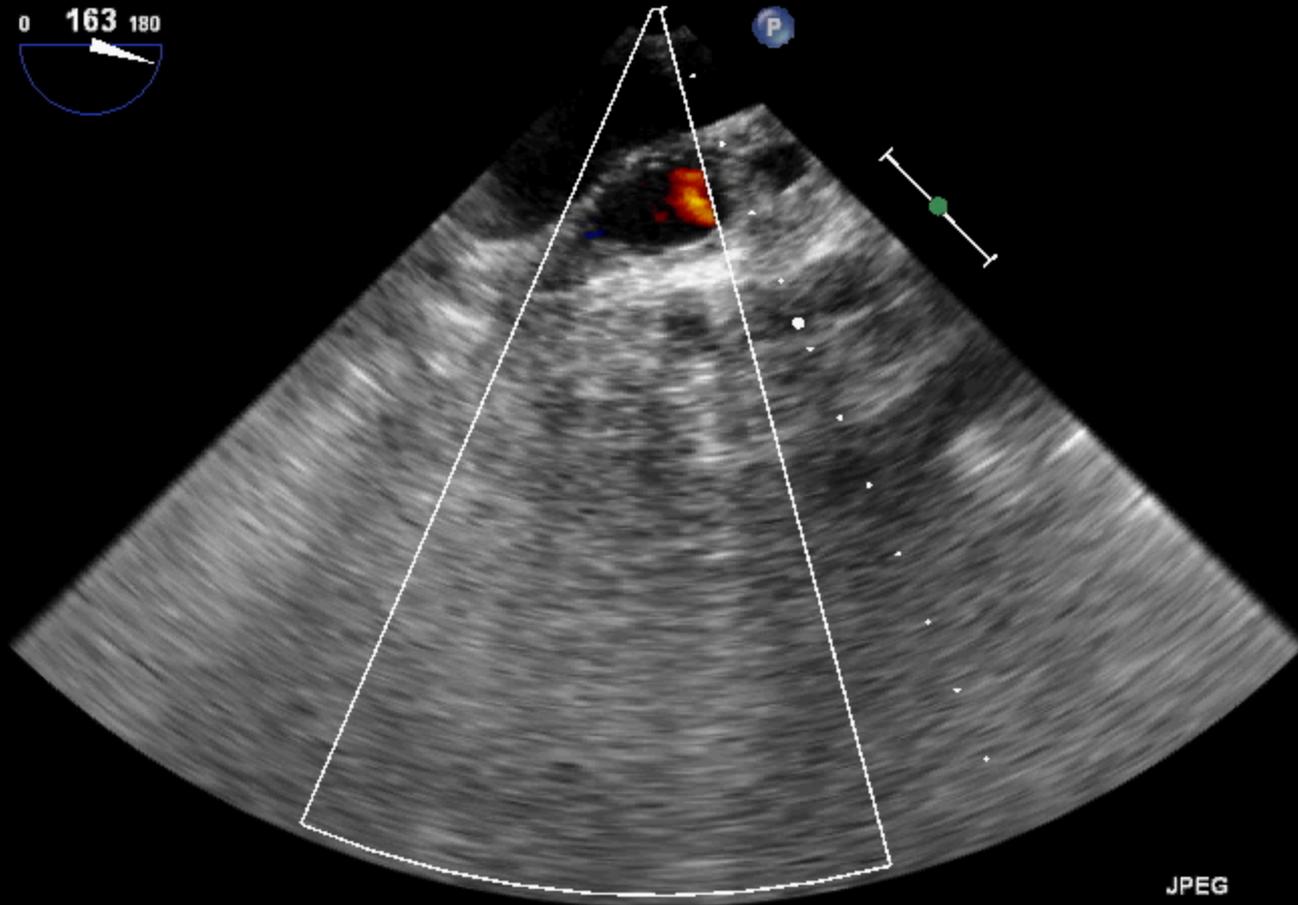
CX7-2t/Adulti

FR 17Hz  
12cm

2D  
80%  
C 50  
P Off  
Gen.



CF  
59%  
4.4MHz  
WF Alto  
Med.

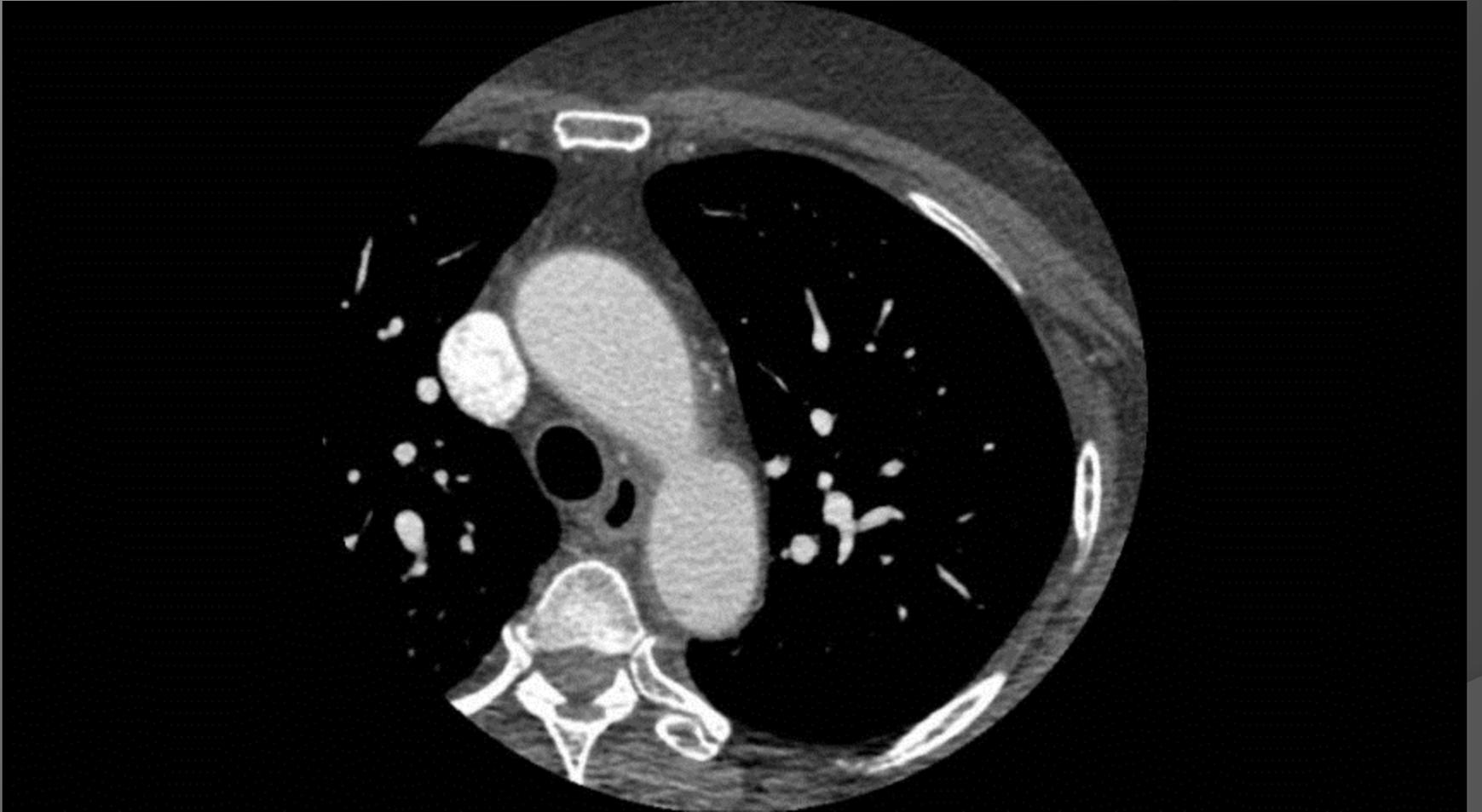


Temp. PAZ.: 37.0C  
Temp. TEE: 38.8C

JPEG

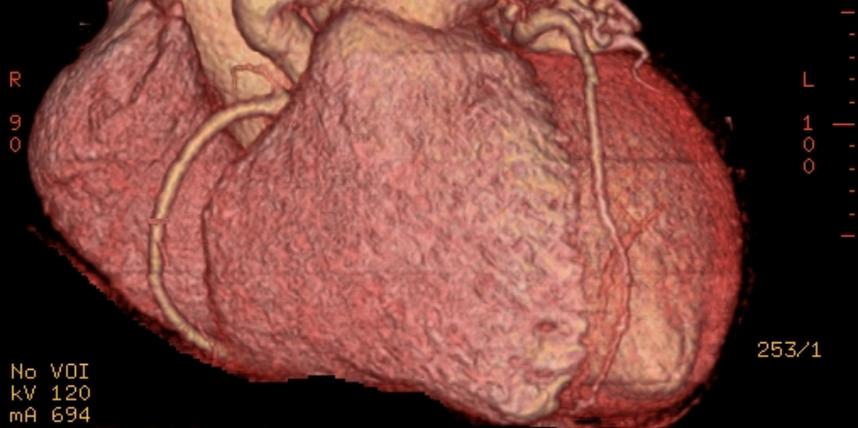
60 bpm

# TC CORONARICA



3D I 25 NISAKORN WATHANEE  
Ex: 14585 Alliance Medical Cento Cannoni  
F 62178x58\_13  
Se:2  
Volume Rendering No cut Ex:Jul 19 2013

DFOV 19.0 cm  
STND/SS40 Omogeneizzazione 3D+ Ph:75%  
0 L 0 LAO 0 CRA

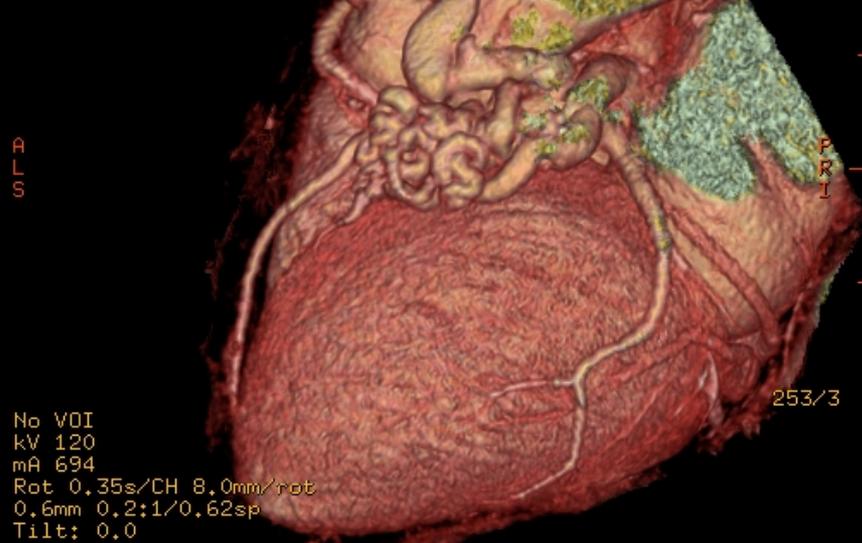


No VOI  
kV 120  
mA 694  
Rot 0.35s/CH 8.0mm/rot  
0.6mm 0.2:1/0.62sp  
Tilt: 0.0  
12:33:29 PM  
W = 1534 L = -255  
I 215

253/1

3D SRA NISAKORN WATHANEE  
Ex: 14585 Alliance Medical Cento Cannoni  
F 62178x58\_13  
Se:2  
Volume Rendering No cut Ex:Jul 19 2013

DFOV 19.0 cm  
STND/SS40 Omogeneizzazione 3D+ Ph:75%  
0 L 115 LAO 30 CRA



No VOI  
kV 120  
mA 694  
Rot 0.35s/CH 8.0mm/rot  
0.6mm 0.2:1/0.62sp  
Tilt: 0.0  
12:33:29 PM  
W = 1534 L = -255  
ILP

253/3

3D  
Ex: 14585

RSP NISAKORN WATHANEE  
Alliance Medical Cento Cannoni  
F 62178x58\_13

Se:2  
Volume Rendering No cut

Ex: Jul 19 2013

DFOV 19.0 cm  
STND/SS40 Omogeneizzazione 3D+ Ph:75%

0 L 57 LAO 41 CRA

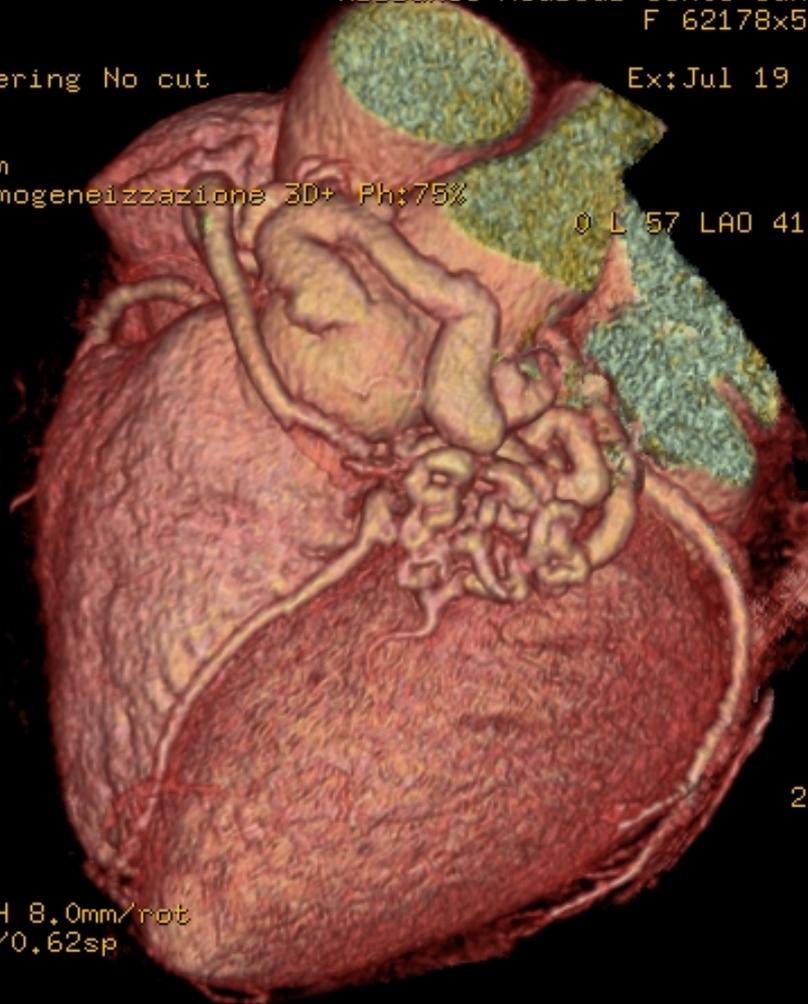
A  
I  
R

P  
S  
L

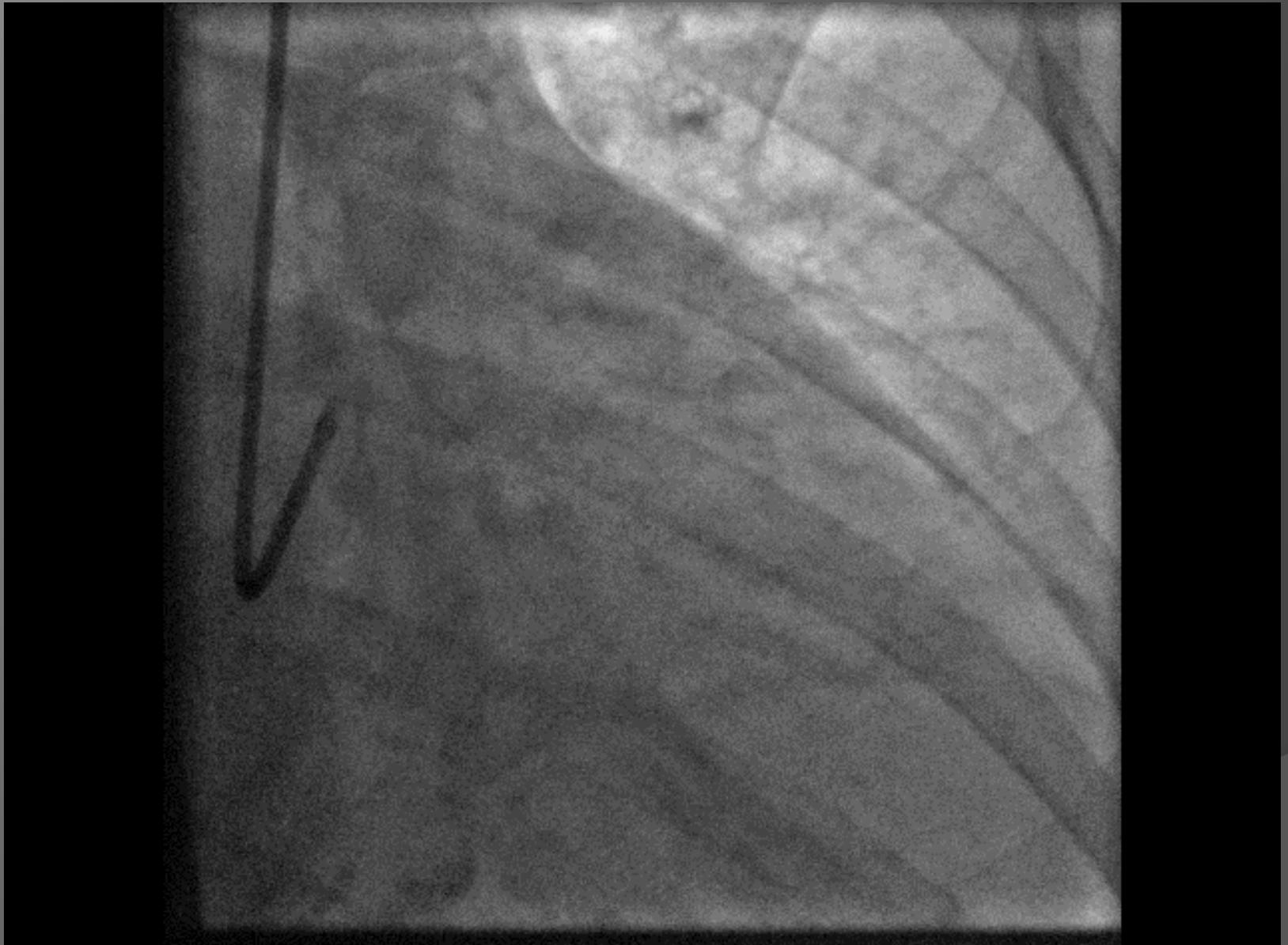
253/2

No VOI  
kV 120  
mA 694  
Rot 0.35s/CH 8.0mm/rot  
0.6mm 0.2:1/0.62sp  
Tilt: 0.0  
12:33:29 PM  
W = 1534 L = -255

LIA



# CORONAROGRAFIA







# INTERVENTO CARDIOCHIRURGICO

La paziente è poi stata sottoposta ad intervento chirurgico di correzione mediante chiusura delle fistole coronariche sia in sede epicardica, mediante legatura, che a livello dello sbocco nel tronco dell'arteria polmonare con sutura diretta.

E' stato necessario quindi un approccio multi-imaging per giungere a diagnosi certa e per definire con precisione i rapporti anatomici in modo da poter pianificare al meglio la strategia chirurgica.

**GRAZIE PER L'ATTENZIONE**