

<b>Adult Echocardiography (AE) Tasks</b>	
<b>Anatomy and Physiology</b>	<b>25%</b>
<i>Normal anatomy</i>	
Assess aorta and sinus of Valsalva	
Assess cardiac anatomy (e.g., chambers, muscle layers, etc.)	
Assess coronary sinus	
Assess pericardium	
Assess valve structure	
Assess vessels of venous return (i.e., venae cavae, hepatic veins, coronary veins)	
Assess wall segments (e.g., structure, nomenclature, etc.)	
<i>Normal physiology</i>	
Assess response to stress testing	
Assess systolic and diastolic function	
Assess valve function	
Assess venous return	
Identify the phases of the cardiac cycle	
<b>Pathology</b>	<b>37%</b>
<i>Abnormal physiology and perfusion</i>	
Assess aneurysms (i.e., true, pseudo-)	
Assess aorta and sinus of Valsalva	
Assess aortic valve regurgitation	
Assess aortic valve stenosis	
Assess arrhythmias and conduction disturbances	
Assess cardiac thrombi, masses, and tumors	
Assess congenital heart disease	
Assess coronary arteries	
Assess diastolic function	
Assess endocarditis	
Assess ischemic cardiac diseases	
Assess left ventricle	
Assess mitral valve regurgitation	
Assess mitral valve stenosis	
Assess pericardial disease	
Assess pulmonary artery	
Assess pulmonic valve regurgitation	
Assess pulmonic valve stenosis	
Assess right ventricle	
Assess segmental wall motion abnormalities	
Assess septal defects	
Assess systolic function	
Assess tricuspid valve regurgitation	
Assess tricuspid valve stenosis	
Assess valve structure and function	
Assess various congenital etiologies of heart disease	
Assess venous return (i.e., venae cavae, hepatic veins, coronary veins, coronary sinus)	
Evaluate for the presence of Ebstein anomaly	
Evaluate for the presence of patent ductus arteriosus	

Evaluate for the presence of tetralogy of Fallot
Identify and evaluate coarctation of aorta
Identify and evaluate endocardial cushion defect
Identify Marfan syndrome
<i>Postoperative evaluation</i>
Assess valve repair or replacement
<b>Integration of Data 2%</b>
<i>Incorporate outside data (Clinical assessment, history and physical [H&amp;P], lab values)</i>
Assess clinical history or medical records
<b>Protocols 25%</b>
<i>Measurement techniques</i>
Assess aortic valve
Assess diastolic function
Assess Doppler recordings and measurements
Assess great vessels
Assess left atrium
Assess left ventricle
Assess mitral valve
Assess pulmonary artery pressure
Assess pulmonic valve
Assess right ventricle
Assess shunt ratios
Assess systolic function
Assess tricuspid valve
<i>Non-sonographic techniques</i>
Perform provocative maneuvers
<i>Sonographic imaging views</i>
Assess apical views
Assess parasternal views
Assess subcostal views
Assess suprasternal notch views
<b>Physics and Instrumentation 10%</b>
<i>Artifacts</i>
Assess Doppler artifacts
Assess imaging artifacts
<i>Hemodynamics</i>
Utilize ultrasound contrast agents
<i>Imaging instruments</i>
Adjust console settings to achieve optimal Doppler recording
Adjust console settings to achieve optimal imaging display
Utilize M-mode
Utilize non-imaging probe
Utilize saline contrast
<b>Other 1%</b>
<i>Managing medical emergencies</i>
Recognize contraindications to contrast agents