

STS
Intra-Op Post TEE Surgeon Worksheet V2.9

Intraoperative TEE performed post procedure: <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes ↓)					
Aortic insufficiency: <input type="checkbox"/> None <input type="checkbox"/> Trace/Trivial <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe					
Mean Aortic Gradient: _____ mmHg					
Aortic Paravalvular leak: <input type="checkbox"/> None <input type="checkbox"/> Trace/Trivial <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe					
Mitral insufficiency: <input type="checkbox"/> None <input type="checkbox"/> Trace/Trivial <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe					
Mean Mitral Gradient: _____ mmHg					
Mitral Paravalvular leak: <input type="checkbox"/> None <input type="checkbox"/> Trace/Trivial <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe					
Tricuspid insufficiency: <input type="checkbox"/> None <input type="checkbox"/> Trace/Trivial <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe					
Mean Tricuspid Gradient: _____ mmHg					
Tricuspid Paravalvular leak: <input type="checkbox"/> None <input type="checkbox"/> Trace/Trivial <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe					
Intra-operative post-procedure Ejection Fraction : _____ (%)					