

	<h2 style="margin: 0;">Echocardiogram (Local)</h2>	<p>{visit.label}</p>
<p>Date of Procedure: <input type="text" value="ECHO:PROCDA"/> / <input type="text" value="ECHO:PROCMO"/> / <input type="text" value="ECHO:PROCYR"/></p> <p style="text-align: center; font-size: small;">Day Month Year</p>		<p>ID: {ID}</p>

1. Time of procedure: :
Hr Min (24 hr clock)

1a. Date and time of last dose of study drug: / / :
Day Month Year Hr Min (24 hr clock)

(ECHO:NODRUG)
or Not Applicable
(Subject not on study drug)

2. Blood pressure at time of procedure: / mmHg
(Systolic / Diastolic)

3. Tricuspid regurgitant jet velocity: m/s **or** (ECHO:TRJVND) Not detectable

4. Estimated right atrial pressure (mmHg): (ECHO:ERAP)5 (ECHO:ERAP)10 (ECHO:ERAP)15 (ECHO:ERAP)20

5. LV function: (ECHO:LVFUN)Normal (ECHO:LVFUN)Abnormal

6. LV ejection fraction:

	None	Trace	Mild	Mild-Moderate	Moderate	Moderate-Severe	Severe
7. Aortic regurgitation:	<input type="checkbox"/> (ECHO:AR)	<input type="checkbox"/> (ECHO:AR)	<input type="checkbox"/> (ECHO:AR)	<input type="checkbox"/> (ECHO:AR)	<input type="checkbox"/> (ECHO:AR)	<input type="checkbox"/> (ECHO:AR)	<input type="checkbox"/> (ECHO:AR)
8. Mitral regurgitation:	<input type="checkbox"/> (ECHO:MR)	<input type="checkbox"/> (ECHO:MR)	<input type="checkbox"/> (ECHO:MR)	<input type="checkbox"/> (ECHO:MR)	<input type="checkbox"/> (ECHO:MR)	<input type="checkbox"/> (ECHO:MR)	<input type="checkbox"/> (ECHO:MR)
9. Tricuspid regurgitation:	<input type="checkbox"/> (ECHO:TR)	<input type="checkbox"/> (ECHO:TR)	<input type="checkbox"/> (ECHO:TR)	<input type="checkbox"/> (ECHO:TR)	<input type="checkbox"/> (ECHO:TR)	<input type="checkbox"/> (ECHO:TR)	<input type="checkbox"/> (ECHO:TR)

10. Other significant findings:

11. Echo recording bar code(s):

Comments for page:

<input type="button" value="Submit Query"/>	<input type="button" value="Cancel"/>	Form Completion Help	<input type="button" value="Print"/>	<input type="button" value="X Rho"/>
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