

TEE ESSENTIALS

How to get the views: A step-by-step guide to probe manipulations

View

1. Mid-esophageal five-chamber view



Probe manipulation

Probe location: Advance the probe to the midesophageal position (usually a depth of about 30 cm).

Transducer angle: 0-10°

Probe tip position: Neutral flexion.

2. Mid-esophageal four-chamber view

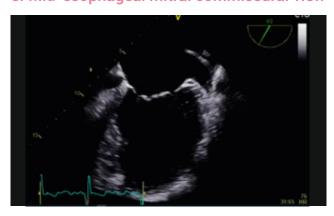


Probe location: Slightly advance the probe.

Transducer angle: Maintain angle of 0-10°.

Probe tip position: Retroflex.

3. Mid-esophageal mitral commissural view



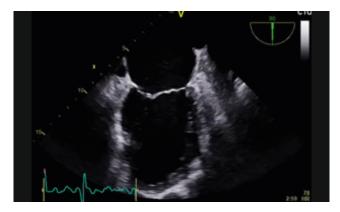
Probe location: Maintain the same probe position.

Transducer angle: Rotate forward to 50-70°.

Probe tip position: Neutral flexion.



4. Mid-esophageal two-chamber view



Probe location: Maintain the same probe position.

Transducer angle: Rotate forward to 80–100°.

Probe tip position: Neutral flexion.

5. Mid-esophageal long-axis view



Probe location: Maintain the same probe position.

Transducer angle: Rotate forward to 120-140°.

Probe tip position: Neutral flexion.

6. Mid-esophageal aortic valve long-axis view



Probe location: Slightly withdraw the probe.

Transducer angle: Maintain angle of 120-140°.

Probe tip position: Anteflex (a turn to the right may be needed).

7. Mid-esophageal ascending aorta long-axis view



Probe location: Slightly withdraw the probe.

Transducer angle: Rotate back to 90-110°.

Probe tip position: Neutral flexion.



8. Mid-esophageal ascending aorta short-axis view



Probe location: Maintain the same probe position.

Transducer angle: Rotate back to 0−30°.

Probe tip position: Neutral flexion; turn to the right for the right pulmonary artery; turn to the left for the pulmonary artery bifurcation.

9. Mid-esophageal right pulmonary vein view



Probe location: Slightly advance the probe.

Transducer angle: Maintain angle of 0-30°.

Probe tip position: Neutral flexion; turn to the right.

10. Mid-esophageal aortic valve short-axis view



Probe location: Slightly advance the probe.

Transducer angle: Rotate forward to 25-45°.

Probe tip position: Turn to the left, then slightly anteflex.

11. Mid-esophageal right ventricular (RV) inflow-outflow view



Probe location: Slightly advance the probe.

Transducer angle: Rotate forward to 50-70°.

Probe tip position: Neutral flexion, then turn to

the right.



12. Mid-esophageal modified bicaval tricuspid valve view



Probe location: Maintain the same probe position.

Transducer angle: Maintain angle of 50-70°.

Probe tip position: Turn to the right; neutral flexion.

13. Mid-esophageal bicaval view

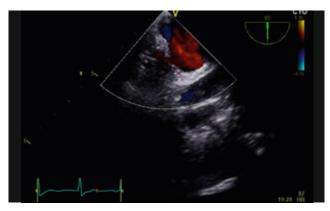


Probe location: Maintain the same probe position.

Transducer angle: Rotate forward to 90-110°.

Probe tip position: Turn to the right; neutral flexion.

14. Mid-esophageal right and left pulmonary veins view



Probe location: Slightly advance/withdraw the probe as required.

Transducer angle: Maintain angle of 90-110°.

Probe tip position: Turn to the right for the rightsided pulmonary veins and then to the left for the left-sided pulmonary veins.

15. Mid-esophageal left atrial appendage view



Probe location: Slightly advance the probe.

Transducer angle: Maintain angle of 90-110°.

Probe tip position: Neutral flexion (possible slight anteflexion).



16. Transgastic basal short-axis view

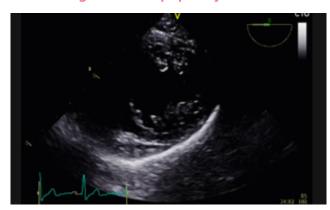


Probe location: Straighten the probe and advance it into the stomach (basal LV level).

Transducer angle: Rotate back to $0-20^{\circ}$.

Probe tip position: Anteflex.

17. Transgastic mid-papillary short-axis view



Probe location: Advance the probe further into the stomach (mid-LV level).

Transducer angle: Maintain angle of 0-20°.

Probe tip position: Anteflex.

18. Transgastic apical short-axis view



Probe location: Advance the probe further into the stomach (apical LV level).

Transducer angle: Maintain angle of 0-20°.

Probe tip position: Anteflex.

19. Transgastic right ventricular basal view



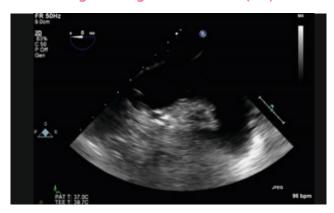
Probe location: Withdraw the probe to the transgastric basal short-axis view.

Transducer angle: Maintain angle of 0-20°.

Probe tip position: Anteflex; turn to the right.



20. Transgastic right ventricular (RV) inflow-outflow view



Probe location: Maintain the same probe position.

Transducer angle: Maintain angle of 0-20°.

Probe tip position: Maximal right-flexion.

21. Deep transgastric five-chamber view



Probe location: Advance the probe to the deep transgastric position.

Transducer angle: Maintain angle of 0-20°.

Probe tip position: Anteflex (left-flexion may be needed).

22. Transgastic two-chamber view



Probe location: Withdraw the probe to the transgastric mid-papillary short-axis view.

Transducer angle: Rotate forward to 90-110°.

Probe tip position: Neutral flexion.

23. Transgastic right ventricular inflow view



Probe location: Maintain the same probe position.

Transducer angle: Maintain angle of 90-110°.

Probe tip position: Turn to the right; neutral flexion.



24. Transgastic long-axis view



Probe location: Maintain the same probe position.

Transducer angle: Rotate forward to 120-140°.

Probe tip position: Turn to the left; neutral flexion.

25. Mid-esophageal descending aorta short-axis view



Probe location: Withdraw the probe to just above the diaphragm.

Transducer angle: Rotate back to $0-10^{\circ}$.

Probe tip position: Neutral flexion

Withdraw/advance the probe as necessary to inspect the extent of the descending aorta in the short-axis view.

26. Mid-esophageal descending aorta long-axis view



Probe location: Maintain the same probe position.

Transducer angle: Rotate forward to 90-100°.

Probe tip position: Neutral flexion.

Withdraw/advance the probe as necessary to inspect the extent of the descending aorta in the long-axis view.



27. Upper-esophageal aortic arch long-axis view



Probe location: Withdraw the probe to the upper esophageal position.

Transducer angle: Rotate back to $0-10^{\circ}$.

Probe tip position: Neutral flexion.

Now turn the probe to the right to bring the aortic arch (long-axis) into view.

28. Upper-esophageal aortic arch short-axis view



Probe location: Maintain the probe in the upper esophageal position.

Transducer angle: Rotate forward to 70-90°.

Probe tip position: Neutral flexion.

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.