

CARLTON CARDIOLOGY ASSOCIATES

Gregory T. Smith, M.D.
Suad A. Ismail, M.D., F.A.C.C.

Diplomates of:
American Board of Internal Medicine
American Board of Cardiovascular Disease



52 Pine Creek Road
Wexford, PA 15090
Phone: (412) 322-2622
Fax: (412) 322-3093

**Cardiovascular Imaging Laboratory
Transthoracic Echocardiographic Study Report**

Name: HOGENMILLER, GERALD

Exam Date: 12/09/2025

Patient ID: 896

DOB: 9/13/1960 Age: 65 years

Gender: M

Sonographer: VM

Primary Physician: Dr. M. Gregorio

Ordering Physician: Dr. Gregory T. Smith, M.D.

Indications: Pre-op evaluation.

Observations

Rhythm: Normal sinus rhythm present.

Left Ventricle: Left ventricle is normal in size, wall thickness & systolic function with no regional segmental wall motion abnormalities seen. Abnormal LV diastolic function. Stage I, impaired relaxation pattern is noted.

Ejection Fraction: Left ventricular ejection fraction is 65-70%.

Right Ventricle: Right ventricular chamber size & global systolic function are normal.

Left Atrium: Left atrium is normal in size.

Right Atrium: Right atrium is normal size.

Mitral Valve: Mitral valve appears structurally normal. No mitral valve prolapse is noted. Mild (1+) mitral regurgitation is seen.

Aortic Valve: Normally functioning, trileaflet aortic valve.

Pulmonic Valve: Normal.

Tricuspid Valve: Trivial tricuspid regurgitation.

Pressures: Pulmonary artery systolic pressures are normal, (25 mmHg).

Venous: The inferior vena cava is normal in size with greater than 50% collapse with inspiration.

Pericardium: Pericardium appears normal. There is no pericardial effusion visualized.

Aorta: The visualized portions of the aortic root & ascending aorta are normal in size.

Other: There is no pleural effusion present. There is no evidence of atrial/ventricular septal defects or patent foramen ovale. The inter-atrial septum is lipomatous.

Conclusions

- No prior studies are available for comparison.

Electronically Signed:

A handwritten signature in black ink, appearing to read 'S. Ismail', written over a light blue horizontal line.

Dr. Suad Ismail, M.D., F.A.C.C.
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