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Dota 6.74c BYS v10 and [BSA-108] How to install DotA 6.74c BYS v10, v11 Early ventricular function assessed by bedside echocardiography in patients with acute pulmonary embolism. To determine whether echocardiographic evaluation of right ventricular (RV) systolic function can be performed accurately in patients with pulmonary embolism (PE). Bedside echocardiographic evaluation of the right and left ventricular function were performed in 46 consecutive patients with acute PE (mean age: 47 + 19 years, and the majority (n = 34) were men) within 24 hours of the onset of the thrombotic event. RV function was assessed as the percentage of the RV area variation during the cardiac cycle (APV) and the E/A wave ratio, whereas LV function was assessed by the mitral Doppler peak early diastolic inflow velocity (E) and the ratio between early and late diastolic velocity of the left ventricular outflow tract (E/A ratio). Patients were classified according to RV systolic function as normal (n = 14), hyperkinetic (n = 14) or hypokinetic (n = 12). The percentage of patients with a normal APV was significantly higher in the group of normokinetic or hyperkinetic patients (11/14) than in the group of hypokinetic patients (2/12). A normal E/A ratio was present in 11 patients. The percentage of patients with a normal E/A ratio was significantly higher in the group of normokinetic or hyperkinetic patients (11/14) than in the group of hypokinetic patients (2/12). The percentage of patients with abnormal LV function was significantly higher in the group of hypokinetic patients (7/12) than in the group of normokinetic or hyperkinetic patients (0/14). The patients with RV hypokinesia had a significantly higher mortality (p = 0.007) and an admission to the intensive care unit (p = 0.03) when compared with the patients with normal RV function. Echocardiographic evaluation of RV function with a simple bedside technique is useful in differentiating patients with PE and abnormal RV systolic function from patients with normokinetic or hyperkinetic RV function. Hypokinetic RV function in patients with PE predicts a higher mortality and a need for intensive care. 2d92ce491b