

## Clinical Image

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# Ventricular fibrillation noted during transthoracic echocardiogram

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### Description

Patients with cardiomyopathy are at increased risk of developing Ventricular Fibrillation (VF). Often times when patients develop VF they present with out-of-hospital cardiac arrest or Implantable Defibrillator (ICD) shock therapy. This phenomenon rarely occurs with diagnostic testing such as during transthoracic echocardiogram. We present a 79-year-old gentleman with a past medical history of nonischemic cardiomyopathy,

ejection fraction of 35%, and previously implanted biventricular ICD who presents to the hospital with a syncopal episode when sitting in a chair at home. While in the emergency room, the patient had an episode of syncope during transthoracic echocardiogram secondary to VF (Figure 1). The patient's defibrillator appropriately detected the malignant ventricular arrhythmia and delivered successful shock therapy (Figure 2).



**Figure 1:** Ventricular fibrillation was noted during the parasternal short axis view of transthoracic echocardiogram.

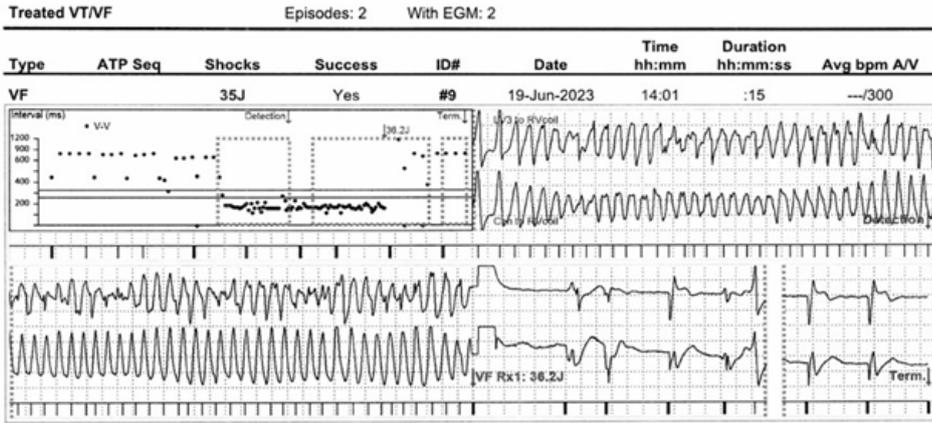


Figure 2: Device interrogation showing ventricular fibrillation with subsequent defibrillation at the same time frame as Figure 1.