### Protocols for MitraClip and paravalvular leak closure

**MitraClip**

Please refer the following patients for MitraClip:
- Symptomatic severe regurgitation (primary or mixed etiology)
- High risk for surgical mitral valve repair or replacement or advanced age (STS score >6-8)
- No acute/subacute endocarditis patients

**Prior To Referral**
- Transthoracic Echocardiogram
- Transesophageal Echocardiogram with 3D (helpful but not required for referral)

**TEE Should Include**
- Comprehensive assessment of the valve with 3D and color
- Please define the pathology in your report and comment on ease or difficulty in probe insertion
- Take the supine images to determine the quality of imaging during procedure
- Rule out LAA clot
- Evaluate the IAS for any prosthesis or patch repair
- Raise systolic blood pressure if needed to elevate the severity
- Document pulmonary vein reversal

### Paravalvular Leak Closure

Please refer the following patients for paravalvular leak closure:
- Any aortic or mitral valve prosthesis with paravalvular regurgitation. (TAVR, SAVR, mechanical or bioprosthesis)
- Any patient who has resistant symptoms of CHF or significant hemolysis with no other cause
- No acute/subacute endocarditis patients

**Prior To Referral**
- Transthoracic Echocardiogram
- Transesophageal Echocardiogram with 3D (helpful but not required for referral)

**TEE Should Include**
- Comprehensive assessment of the valve with 3D and color
- **Please try to define the location and size of the defect** (see reference image above)
- Please comment on ease or difficulty in probe insertion
- Take the supine images to determine the quality of imaging during procedure
- Rule out LAA clot
- Evaluate the IAS for any prosthesis or patch repair