Supplementary material

Pająk J, Karolczak MA, Mądry W, et al. Staged and primary Yasui repair in infants with interrupted aortic arch. Kardiol Pol. 2022.

Video S1. Case 1. TTE. 5-chamber view: well developed two ventricles. Double outlet right ventricle with d- malposition of the aorta and overriding pulmonary trunk

Video S2. Case 1. TTE. Parasternal longitudinal axis: Large subpulmonary ventricular septal defect. Pulmonary trunk overriding interventricular septum. Subaortic stenosis due to conal septum deviation. D- malposition of the aorta arising from the right ventricle

Video S3. Case 1. TTE. Suprasternal notch projection with the interruption of the aortic arch beyond the left subclavian artery (type A). Wide patent arterial duct with color Doppler bidirectional flow

Video S4. Case 2. TTE. 5-chamber view. Well-developed both ventricles. Left ventricle outlet tract obstruction due to conal septum posterior malalignment. Large ventricle septal defect

Video S5. Case 2. TTE. Suprasternal notch projection: Norwood procedure with reconstructed aortic arch and neo-isthmus

Video S6. Case 2. TTE. Short parasternal projection — Sano modification of the Norwood procedure with 5mm anastomosis providing flow from the right ventricle to pulmonary arteries.

Video S7. Case 2. TTE. 5-chamber view. Yasui operation: large patch rerouting blood from the left ventricle to the reconstructed neo-aorta and providing double lumen outflow tract for the left ventricle

Video S8. Case 2. TTE. Parasternal longitudinal axis - large patch rerouting blood from the left ventricle to the reconstructed neo-aorta. Right ventricle outlet tract with mild proximal prosthesis stenosis