Supplementary material

Góreczny S, Szeliga J, Lazu M, et al. Implantation of a large self-expanding pulmonary valve from jugular vein approach in a teenage patient. Pol Heart J. 2024.

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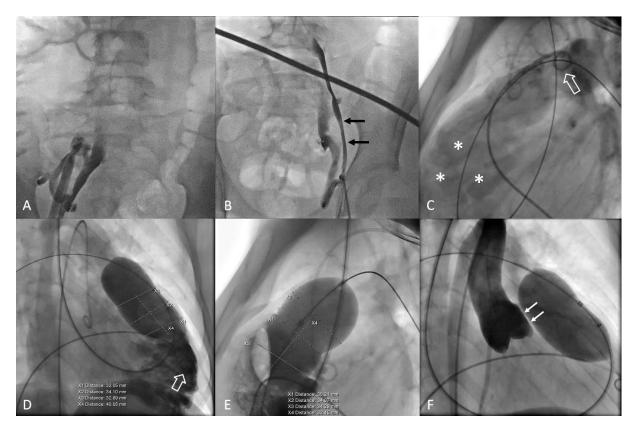


Figure S1. Angiography in a teenager with a sever pulmonary regurgitation after patch repair of Tetralogy of Fallot. **A.** Contrast injection to the right femoral vein revealed occlusion of the ipsilateral iliac vain with wide collateral vessels. **B.** Contrast injection to the left femoral vein showed a significantly narrow iliac vein (black arrows) with additional collateral vessels. **C.** Angiography in a left lateral projection through a pigtail catheter placed at the bifurcation of pulmonary arteries (white empty arrow) confirms significant pulmonary regurgitation with retrograde contras flow deep into the dilated right ventricle (white asterisks). **D, E.** Inflation of a compliant sizing balloon (Amplatzer Sizing Balloon II 34 mm, Abbott) in the right ventricular outflow tract with simultaneous contrast injection to the right ventricle (white empty arrow) to assess patient suitability for a self-expanding valve and selection of the size. **E.** Inflation of a compliant sizing balloon in the right ventricular outflow tract with simultaneous contrast injection to the right ventricle with simultaneous contrast injection to the right ventricle (white empty arrow) to assess patient suitability for a self-expanding valve and selection of the size. **E.** Inflation of a compliant sizing balloon in the right ventricular outflow tract with simultaneous contrast injection to the size.

injection to the ascending aorta revealed flattening of the right coronary sinus (white arrows), however without causing aortic regurgitation