A 55-year-old male patient was admitted to our clinic with atypical chest pain and without atherosclerotic risk factors. On his physical examination, blood pressure and heart rate were 125/70 mmHg and 95 bpm, respectively. Heart and respiratory auscultation findings were normal except for 2/6 systolic murmur, which was heard maximally at the left parasternal region. Electrocardiogram showed sinus rhythm. Transthoracic echocardiography showed normal left ventricular systolic function (ejection fraction: 68%) and mass on the tricuspid valve. For a more accurate assessment, we performed a transesophageal echocardiography, which showed a mobile 0.9 x 0.9 cm mass involving the tricuspid septal leaflet (Figs. A, B, Videos 1, 2*). Because of its mobility and the risk of embolization, the mass was surgically removed. The histological findings suggested papillary fibroelastoma. The patient was discharged uneventfully after the operation.

Figures– (A, B) A mobile 0.9 x 0.9 cm mass involving the tricuspid septal leaflet. *Supplementary video files associated with this case can be found in the online version.