We present a 35-year-old man admitted to our clinic for routine control. In anamnesis, the patient described himself as an amateur football player. He did not suffer any shortness of breath, angina or palpitations while playing the sport. He had no history of syncope and no relative with sudden death of unknown origin. While his physical examination findings were normal, his electrocardiogram revealed sinus bradycardia with a rate of 48 beats/minute, and incomplete right bundle branch block. In his echocardiographic images, a large Eustachian valve with patent foramen ovale was detected in the apical view (Figure A-D and Video 1*). In the subcostal view, this image appeared as a mobile ring (Figure E and Video 2*). The Eustachian valve is congenital remnant tissue that sometimes emerges with infective endocarditis, thrombus or obstruction. There are some case reports in the literature about various shapes and clinics for the Eustachian valve. In the present case report, we wanted to demonstrate a different imaging variation of the Eustachian valve and emphasize the importance of evaluating echocardiographic views as much as possible.

A ring-shaped image in the right atrium
Sağ atriyum içerisinde yüzük şekline görünüş

Figures– (A) and (B) large Eustachian valve, (C) and (D) large Eustachian valve with patent foramen ovale. (E) Ring shaped in different angels. *Supplementary video files associated with this presentation can be found in the online version of the journal.