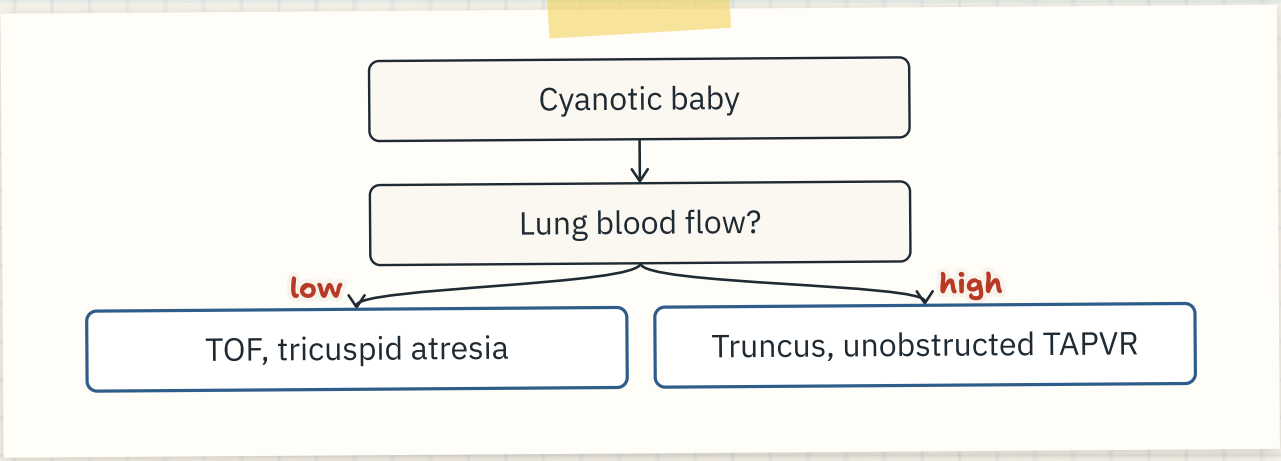
Cyanotic heart lesions: the 5 T's

Sort by lung flow; transposition by timing



Step by step

1. Cyanosis: more than 5 g/dL deoxygenated Hb
2. Right-to-left shunt bypasses the lungs
3. Ask: how much lung flow?
4. Ask: how soon does the baby turn blue?

Lesion	Key clue
Tetralogy of Fallot	Boot-shaped heart; spells 2–4 months
Transposition	Blue within hours; egg on a string
Tricuspid atresia	Left axis deviation on ECG
Truncus arteriosus	Mild cyanosis, then heart failure
TAPVR	Snowman; obstructed form: small heart

Lesion and key clue

Rule of thumb

Lung flow low: tetralogy, tricuspid atresia

Lung flow high: truncus, unobstructed TAPVR

Knees to chest raises systemic resistance: less shunt

Exam traps

- Every cyanotic baby looks alike; use timing, murmur and chest film.
- Tetralogy has a harsh murmur and a boot, not an egg.
- Obstructed TAPVR is a small heart with pulmonary oedema, and needs urgent surgery.

Cyanotic congenital heart disease: the five T's

Video, written lesson, practice question and sources: medservatory.com/usmle-step-2-ck/paediatrics/cyanotic-congenital-heart-disease

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