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Cover Photographs

Left: Aortic Arch Aneurysm Associated With Coarctation and Absence of the Main Branches of Left Subclavian Artery. Three-dimensional computed tomographic scan of the aorta revealed significant stenosis (10 mm in diameter) in the distal aortic arch (part B) with poststenotic dilation (part A) and clearly demonstrated a kinking and stenosis (minimal diameter, 7.4 mm) in the descending aorta (part C). RBCA, Right brachiocephalic artery; LCCA, left common carotid artery.

Center: Bicuspid Aortic Valves Undergo Excessive Strain During Opening: A Simulation Study. Severity of the stenosis maximal opening (upper right), flow distribution (upper left), and transvalvular pressure gradient (lower) is shown for each model. Valve opening and flow distribution were sampled at 0.1-second intervals from the onset of ejection. Thickness of the arrow in the flow distributions indicates the flow velocity. TAV, Tricuspid valve; STAV-1, Stenotic tricuspid valve model 1; STAV-2, Stenotic tricuspid valve model 2; BAV, Bicuspid aortic valve.

Right: Video-Assisted Left Main Bronchial Carcinoma Resection and Secondary Carinal Reconstruction. A, A schematic diagram illustrates the positioning of the 3 incisions. Representative photos of left main bronchus (LMB) tumor resection and left secondary carinal reconstruction: the luminal tumor is cut free of the bronchus (B), interrupted sutures are placed in the membranous part of left upper lobe bronchus (LUL) and the left lower lobe bronchus (LLL); and the anastomosis is completed between the left main bronchus and the combination of left upper and lower lobe bronchi (D and E). Schematic diagrams of operative procedures (F) and secondary carinal reconstruction (G). ICS, Intercostal space.