I Systolic Function
1. Limitations of ejection fraction
   - LV hypertrophy – endocardial vs midwall shortening
   - near-normal LV function

2. Contractility
   - situations when load interferes with assessment of function
   - role of strain rate, non contraction-phase markers

3. Synchrony
   - importance of temporal resolution
   - role of averaging

II Diastolic Function
1. Limitations of isolated LV filling
   - why MR mimicking echo may not be the best option

2. Assessment of the components of diastole
   - suction and untwist
   - relaxation
   - compliance

III Subclinical dysfunction
1. Situations when this is important
   - stage A and B of heart failure

2. Tools for assessment of subclinical dysfunction
   - strain and strain rate
   - myocardial characterization in relation to subclinical dysfunction (diffuse fibrosis, deposition)

IV Stress
1. Role of stress wall motion imaging
   - why worry about this when we have perfusion?

2. Limitations of wall motion scoring
   - quantitation – strategies and pitfalls