

Patient Name: \_\_\_\_\_

Previous exam: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Technologist: \_\_\_\_\_

## RENAL ULTRASOUND WORKSHEET

### CLINICAL INFORMATION (CIRCLE ALL THAT APPLY):

Hypertension, abdominal aortic aneurysm, renal failure, hydronephrosis, renal calculus, renal cyst, renal disease, urinary tract infection, hematuria, prostatic hypertrophy, prostatitis, arterial bruit, urinary incontinence, generalized abdominal pain, proteinuria, abnormal X-ray, abnormal CT, abnormal renal function test.

OTHER CLINICAL INFORMATION OR SYMPTOMS: \_\_\_\_\_

Right Kidney \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_  Normal Doppler

- Normal or check any that apply:      Comments: \_\_\_\_\_
- Increased echogenicity
  - Parenchymal thinning
  - Stones
  - Masses
  - Cysts
  - Scarring
  - Hydronephrosis
  - Other

Left Kidney \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_  Normal Doppler

- Normal or check any that apply:      Comments: \_\_\_\_\_
- Increased echogenicity
  - Parenchymal thinning
  - Stones
  - Masses
  - Cysts
  - Scarring
  - Hydronephrosis
  - Other

Bladder  Normal  Pre-void Volume: \_\_\_\_\_  Post-void Vol: \_\_\_\_\_  Bilateral ureteral jets – Doppler

Comments: \_\_\_\_\_

Routine, no immediate call back necessary

Call report to: \_\_\_\_\_ Number or Pager: \_\_\_\_\_

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