

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

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

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

### TIPS Ultrasound Worksheet

Ordering Physician: \_\_\_\_\_ Clinical Info: \_\_\_\_\_

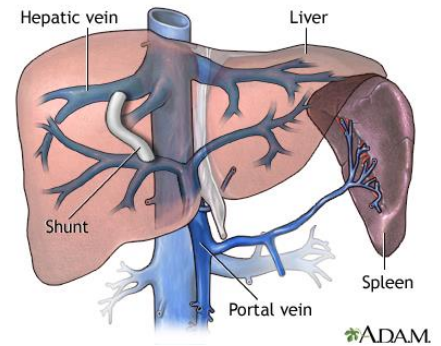
Imaging Protocol: This exam will include the entire liver, a four-quadrant evaluation for ascites, and color and spectral Doppler evaluation of the TIPS, the portal veins, and the hepatic vein that the TIPS communicates with.

#### Peak Systolic Velocities (cm/sec)

Main Portal Vein	Current Exam	Main Portal Vein	Prior Exam
TIPS at communication w/ portal vein		TIPS at communication w/portal vein	
Proximal TIPS		Proximal TIPS	
Mid Tips		Mid Tips	
Distal TIPS		Distal TIPS	
TIPS at communication with hepatic vein		TIPS at communication w/ hepatic vein	
Hepatic vein just distal to TIPS		Hepatic vein just distal to TIPS	

Flow Direction in portal veins (Circle one):

Main Portal Vein:	ANTEGRADE	RETROGRADE
Right Portal Vein:	ANTEGRADE	RETROGRADE
Left Portal Vein:	ANTEGRADE	RETROGRADE



Routine, no call necessary

Call report to (name and pager): \_\_\_\_\_