VASCULAR ULTRASOUND – IMAGE REVIEW SHEET

For each criteria item place a: Check Mark to indicate YES/ "X" to indicate No/ N/A to indicate Not Applicable

Facility Name/IHF No.____

	Patient 1	Patient 2	Patient 3	Patient 4	Patient 5
Patient Identifier (Exam #, Patient Initials)					
Examination Date					
Examination Type					
Examination Clinically Indicated					
Tech worksheets complete and signed					
Sufficient Number of images obtained for third party interpretation					
Physician Interpretation Complete as per CPP's					
Record interpreting physician/technologist (initials)					
Image Quality – Diagnostic/Undiagnostic					

Comments:

Patient 1
Patient 2
Patient 3
Patient 4
Patient 5

VASCULAR ULTRASOUND – IMAGE REVIEW SHEET

For each criteria item place a: Check Mark to indicate YES/ "X" to indicate No/ N/A to indicate Not Applicable

Facility Name/IHF No.____

	Patient 6	**Patient 7**	**Patient 8**	**Patient 9**	**Patient 10**
Patient Identifier (Exam #, Patient Initials)					
Examination Date					
Examination Type					
Examination Clinically Indicated					
Tech worksheets complete and signed					
Sufficient Number of images obtained for third party interpretation					
Physician Interpretation Complete as per CPP's					
Record interpreting physician/technologist (initials)					
Image Quality – Diagnostic/Undiagnostic					

Comments:

Patient 6
Patient 7
Patient 8
Patient 9
Patient 10

VASCULAR ULTRASOUND – IMAGE REVIEW SHEET

For each criteria item place a: Check Mark to indicate YES/ "X" to indicate No/ N/A to indicate Not Applicable

Facility Name/IHF No.____

	Patient 11	Patient 12	Patient 13	Patient 14	Patient 15
Patient Identifier (Exam #, Patient Initials)					
Examination Date					
Examination Type					
Examination Clinically Indicated					
Tech worksheets complete and signed					
Sufficient Number of images obtained for third party interpretation					
Physician Interpretation Complete as per CPP's					
Record interpreting physician/technologist (initials)					
Image Quality – Diagnostic/Undiagnostic					

Comments:

Patient 11
Patient 12
Patient 13
Patient 14
Patient 15