

**VASCULAR ULTRASOUND – TECH 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. \_\_\_\_\_

GENERAL INFORMATION	Meets	Meets with Rec's	Does not Meet	N/A	Comments
1. Does the vascular sonographer:					
<ul style="list-style-type: none"> <li>Ensure patient examinations/media contains patient name, ID#, type and date of examination</li> </ul>					
<ul style="list-style-type: none"> <li>Supplement clinical history if not provided by the referring physician</li> </ul>					
<ul style="list-style-type: none"> <li>Do the technologists have appropriate certification for vascular u/s?</li> </ul>					
<ul style="list-style-type: none"> <li>Ensure the examination includes interrogation of all relevant anatomy using appropriate transducers and gain settings</li> </ul>					
<ul style="list-style-type: none"> <li>Follow infection control policies</li> </ul>					
<ul style="list-style-type: none"> <li>Maintain patient privacy at all times</li> </ul>					
<ul style="list-style-type: none"> <li>Perform quality control procedures as per facilities policies</li> </ul>					
<ul style="list-style-type: none"> <li>Implement the facility's policies and procedures</li> </ul>					
2. During the observation of the ultrasound procedures has the technologist applied the following during the examination:					
<ul style="list-style-type: none"> <li>Total gain control set correctly</li> </ul>					
<ul style="list-style-type: none"> <li>Appropriate magnification</li> </ul>					
<ul style="list-style-type: none"> <li>Overall gain properly adjusted</li> </ul>					
<ul style="list-style-type: none"> <li>Focal zone set correctly</li> </ul>					
<ul style="list-style-type: none"> <li>Proper use of calipers</li> </ul>					
<ul style="list-style-type: none"> <li>Correct sample size, position, angle, gain, Doppler frequency, velocity scale</li> </ul>					
<ul style="list-style-type: none"> <li>Measurements documented</li> </ul>					
<ul style="list-style-type: none"> <li>Scan correctly annotated</li> </ul>					
<ul style="list-style-type: none"> <li>Scan through the entire organ appropriately</li> </ul>					
<ul style="list-style-type: none"> <li>Are the technologist worksheets appropriate for the scanning region?</li> </ul>					
<ul style="list-style-type: none"> <li>Have the technologist worksheets been completed to assist in diagnosis?</li> </ul>					
<b>Extracranial Cerebrovascular System:</b> Is real-time imaging of the common carotid, internal carotid and proximal external carotid arteries performed so as to accurately assess the morphology and degree of stenosis?					

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<p><b>Peripheral Veins-</b> is the common femoral, femoral, proximal great saphenous, proximal profunda femoris and popliteal veins assessed to determine the presence and location of thrombi?</p>					
<p><b>Peripheral Arteries –</b> is the common femoral, femoral and proximal profunda femoris and popliteal arteries assessed to determine the morphology, location and degree of stenosis?</p>					
<ul style="list-style-type: none"> <li>• Is the ankle to brachial ratio recordings obtained</li> </ul>					

**Notes:**

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