US TRAINING SHEET

(NOT for chart documentation)

(<u>1101</u> 101 011a11	documentation)	
SCANNER'S NAME:		

(Affix patient sticker)

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F.A.S.T
• Indication was suspected □thoracoabdominal trauma, □hypotension of unknown etiology, □concern of cardiac arrest and suspected asystole, □concern of hypoxia and suspected PTX/pleural effusion, □other
• Limitations: □none, □body habitus, □inadequate time for completion, □subcutaneous air, other
• Trauma FAST: □complete, □indeterminate b/c (bladder decompressed, left diaphragm not seen, etc.):
• Results: Abdomen: hemoperitoneum (□Yes □No □N/A) Location free fluid:
Cardiac: pericardial effusion/hemopericardium (□Yes □No □N/A)
hyperdynamic cardiac function (□Yes □No □ N/A),
decreased global wall function of the heart ($\square Yes \square No \square N/A$)
asystole (Tyes Tho Th/A)
Lung: pleural effusion/hemothorax (Yes No N/A)
pneumothorax (□No □Yes-right □Yes-left □N/A) Other:
• Confirmatory Study (attach report if available) \(\sigma\) Attending, \(\sigma\) CT, \(\sigma\) OR \(\sigma\) other:
<u>Gallbladder</u>
• Indication for the examination was suspected symptomatic biliary disease
• Limitations: □none, □habitus, □bowel gas, □inability to properly position patient, □other:
• Findings (negative, positive): Sonographic Murphy's (Yes/ No), Neck (well, not well) visualized
pericholecystic fluid (\square yes/ \square no), Gallstones (\square not seen/ \square single stone/ \square multiple stones)
wall thickening (□yes/□no), Other: • Impression: □normal, □cholelithiasis, □cholecystitis, □other:
 Impression: □normal, □cholelithiasis, □cholecystitis, □other: Confirmatory Study (attach report if available) □Attending, □CT, □US, □OR, other:
Community Study (under report is a variable) 2:1110-14mg, 2-21, 2-05, 2-014, others
<u>OB</u>
• Indication was: \square desire to confirm intrauterine pregnancy, \square other:
• Exam Type: Transabdominal, Transvaginal
• Limitations: □none, □patient preparation, □body habitus, □bowel gas, □other:
• Findings: \(\subseteq \text{gestational sac} - \text{mean sac diameter} \) mm, \(\subseteq \text{yolk sac}, \subseteq \text{fetal pole}, \(\subseteq \text{embryo seen CRL} \) wks,
□FHR atbpm, □subchorionic hematoma, □fluid in cul-de-sac w/o echoes, □fluid in cul-de-sac w/echoes,
□Other:
• Comminatory Study (attach report in available) (attachding, ale 1, ales, alex, alettici.
<u>Aorta</u>
Indication was suspected AAA
• Limitations: □none, □partially visualized aorta, □other:
• Results: \square normal, \square AAA at cm AP and it (\square can / \square can not) be determined to be greater than 2cm distal to the SMA.
• Confirmatory Study (attach report if available) □Attending, □CT, □US, □OR, □other:
Renal and/or Bladder Ultrasound
 • Indication was suspected □obstructive uropathy, □urinary retention, □other: • Limitations: □none, □inability to properly position patient, □body habitus, □other:
• Results: right kidney hydronephrosis - \(\sum \) none \(\sum \) moderate, \(\sum \) moderately severe, \(\sum \) severe
left kidney hydronephrosis - \square none \square mild, \square moderately severe, \square severe
□Bladder post void residual volume ofcc.
Other:(Note if at risk for AAA aorta must also be scanned)
• Confirmatory Study (attach report if available) □Attending, □CT, □US, □other:
Other Study:
• Indication:
• Limitations:
• Results:
• Confirmatory:
Reviewer Comments: Accuracy: (TVes TNo)

Affix the following images to the Back:

- 1. FAST: pericardial, Perihepatic, Perisplenic, and pelvic window (sagittal)
- 2. Gallbladder: Long and short view of the gallbladder (including neck) with measurements of its width, wall thickness
- 3. OB: Long and short view of the uterus confirming position of IUP/view of cul-de-sac (+/- FHR, CRL, MSD)
- 4. Aorta: Long axis- proximal, mid, and distal aorta; Transverse axis proximal, mid and distal aorta
- 5. Renal: Long view of both left and right kidney and bladder view.