

AV Graft US Technologist Worksheet

St Vincents Riverside Southside Clay St Johns Imaging Center Arlington ER Westside ER Beach ER

Optimal Forbes Southside Clay Mandarin Westside St Johns Town Center Orange Park

Patient Name: _____ MMI: _____ Age: _____

History/Symptoms: _____

AV Graft Anatomy: _____ Date Graft Created: _____

	1st Measurement	2nd Measurement	3rd Measurement
Arterial Flow Volumes (mL/min)			
Venous Flow Volumes (mL/min)			

Signs of >50% stenosis include: draining vein flow volume <600 mL/min or $\geq 25\%$ decrease compared to prior.

	PSV (cm/sec)	Diameter (mm)
Artery 2 cm Proximal to Arterial Anastomosis		
At Artery/Graft Anastomosis		<i>not applicable</i>
Mid Graft		<i>not applicable</i>
At Graft/Venous Anastomosis		<i>not applicable</i>
Vein 5 cm From Anastomosis (Proximal)		<i>not applicable</i>
Vein 10 cm From Anastomosis (Mid)		<i>not applicable</i>
Vein 15 cm From Anastomosis (Distal)		<i>not applicable</i>

Signs of >50% stenosis include: >50% luminal narrowing at grayscale imaging; peak velocity >400-500 cm/sec at stenosis; velocity ratio >3.0 AVG arterial anastomosis, >2.0 AVG venous anastomosis, >2.0 draining vein.

Signs of >75% stenosis at venous anastomosis include: velocity ratio >3.0.

DVT	Subclavian / Common Femoral Vein	None	Nonocclusive	Occlusive	Chronic
	Axillary / Femoral Vein	None	Nonocclusive	Occlusive	Chronic
	Brachial / Popliteal Veins	None	Nonocclusive	Occlusive	Chronic

For all indications document diameter & distance from anastomosis of any accessory veins extending off the draining vein:

Sonographer's Impression: _____

Sonographer's Name, Date & Time: _____ # Images _____

Not Intended for Treatment Planning

MI-0641C
(Revised 6/2025)

Tech Wrksht - "AV Graft US Chrtform"