

Female Pelvis (Non-OB) 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: _____

Pelvic Pain		Swelling/Bloating		Heavy Menses		Vaginal Bleeding		Pain w/ Sex		Hematuria	
R	L	Frequent Menses		Painful Menses		Post Meno Bleeding		Fibroids		Dysuria	
LMP		G	Post Menopausal		Birth Control		Tubal Ligation		TA Scan		
		P	Post Hysterectomy		Intrauterine Device		Hormone Replacement				
# Spont Abort:		Preg Test		Negative		Pending		Quant Level		EV Scan	
# Elect Abort:				Positive		Not Ordered					

UTERUS (poorly visualized)

x	x	cm	anteverted	anteflexed	endometrium	uterine mass
			retroverted	retroflexed	mm	N Y

Uterine Findings: _____

RIGHT OVARY (poorly visualized) LEFT OVARY (poorly visualized)

Size	x	x	cm	x	x	cm		
Mass	none	solid	cystic	complex	none	solid	cystic	complex
Blood Flow	wnl	↑	↓	absent	wnl	↑	↓	absent

Ovarian Findings: _____

FREE FLUID	none	trace	small	moderate	large
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Sonographer's Impression: _____

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

SN TV Probe: _____ HLD Completion Date/Time: _____ Performed By: _____