

AUSTIN RADIOLOGICAL ASSOCIATION
ULTRASOUND PROTOCOLS

Procedure Name: **OB Limited for ED and FSED Patients**

Indications:

May include but not limited to rule-out ectopic pregnancy, question of gestation age, bleeding with positive pregnancy test, fetal viability, question of number of gestations, evaluate pelvic mass, pelvic pain, follow up of prior ultrasound, placental location, cervical length or for any other valid medical reason.

General Description:

This is a survey of the female pelvis which will include examination of the possible embryo, uterus, right and left ovaries, and adnexal regions. To further delineate embryonic structures, heart rates, and pelvic structures, a transvaginal ultrasound may be performed.

Patient Preparation:

The patient's urinary bladder must be adequately distended (cover length of normal size uterus) for the exam. This typically requires drinking at least 32oz. of water 30-45 minutes prior to the exam.

Equipment Selection and Settings:

A curvilinear transducer of 4.0MHz or higher will be used for most patients (select appropriate probe for pedi or small body habitus), for transabdominal exam and appropriate endovaginal transducer for transvaginal imaging. The sonographer should use the preprogrammed setting for the appropriate body part and adjust gain, depth, and focal zones to optimize images. Fill out any applicable worksheet upon completion of exam.

Imaging Sequence:

The following image sequence is for a normal exam. Include additional images of pathology to demonstrate dimensions in three planes, texture, size, shape and relationship to adjacent anatomy. If there are multiple uterine fibroids or ovarian cysts, label these 1, 2, 3 etc. to correspond with worksheet labels. Include hepatorenal space (Morrison's pouch) image when appropriate to r/o free fluid in the abdomen.

1. Image patient data (include LMP and pregnancy history)
2. Long Uterus mid (length and AP measurement)
3. Long Endometrium measurement, if applicable
4. Color Doppler evaluation of the endometrium required when retained products of conception is in question (i.e. postpartum bleeding, abortion)
5. Trans Uterus mid (transverse measurement)
6. Long Uterus lower segment/cervix/vagina
7. Long Uterus midline to RT
8. Long Uterus midline to LT
9. Trans Uterus cervix to fundus

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10. Long RT ovary (length and AP measurement)
11. Trans RT ovary (transverse measurement)
12. Long and Trans RT adnexa
12. Long LT ovary (length and AP measurements)
13. Trans LT ovary (transverse measurement)
14. Long and Trans RT adnexa

Identify, document and measure as necessary

1. Measure gestational sac with three dimensions
2. Identify number of gestations
3. Absence or presence of cardiac activity using M-mode only and measure heart rate at least twice
4. Measure crown-rump length (at least 2 measurements)
5. Biometric measurements if greater than 1st trimester
6. Image yolk sac if seen
7. Placenta location, if applicable
8. Cervical length, if applicable

A transvaginal exam may be necessary to document and obtain images of the fetus and/or cervical length