

Name: DOB:

Address:

..... Phone:

ULTRASOUND DUPLEX ASSESSMENT

ARTERIAL

- Carotid & Vertebral Ultrasound
 Ankle-Brachial Index (ABI)
 Lower Limb Left Right Bilateral
 Aorto-iliac/ AAA Ultrasound
 Renal Artery Ultrasound
 Mesenteric Artery Ultrasound
 Upper Limb Left Right Bilateral

VENOUS

- DVT Lower
 DVT Upper
 Varicose Veins Ultrasound (Venous Insufficiency)
 IVC / Iliac veins
 Ovarian / Pelvic Veins
 Perforator Marking
 Conduit Marking

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ARTERIOVENOUS FISTULA

- Mapping Surveillance Lower Upper Right Left

VASCULAR DISEASE SCREENING

- Consists of Carotid Ultrasound - cerebrovascular screen
- ABI's - screen for peripheral arterial disease
- Aorta Ultrasound - screen for AAA

THORACIC OUTLET SYNDROME

- Right Left

Other:

Clinical Details:

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Referring Doctor:

Address:

Phone: Fax: Would you like to receive correspondence by email?

Email:

Provider Number: Signature:

Referral Date:

Please see over for further information... >>

Preparation

For many vascular ultrasound examinations, no specific preparation is necessary.

If the patient is having an abdominal ultrasound:

- Fasting from midnight prior to the ultrasound is required, although moderate clear fluid is allowed.
- Take medication as usual.
- If the patient is diabetic, a piece of toast with clear fluid is acceptable.

Other

Allow 30 minutes for each test. Eg. two legs are considered as two tests.

Missed appointments are costly, please call 24 hours before examination if not able to attend.

North Shore Health Hub

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Parkway SAN Clinic

Suite 207, 172 Fox Valley Rd, Wahroonga NSW 2076



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