

## Lower Extremity DVT

- 1. Compression every 2 cm (or less) in (short axis) transverse plane with non-compression comparison in B-mode of following veins. Also include Spectral Doppler waveforms from the long axis for each of the following:
  - R/L common femoral vein (CFV)
  - R/L greater saphenous vein (GSV) at origin, approximately first 2 cm. If whole extremity occluded, document entire GSV
  - R/L proximal deep femoral vein (DFV)
  - R/L superficial femoral vein (FV) prox, mid, and dist
  - R/L popliteal vein (POP V)
  - R/L posterior tibial vein (PTV)
- 2. Interrogate all deep calf veins seen.
- 3. Spectral Doppler waveform with augmentation at CFV unless DVT seen. *No augmentation if DVT seen.*
- 4. If DVT seen at CFV, image IVC and iliac veins.
- 5. On all studies, include spectral Doppler waveforms from long axis for bilateral CFVs or bilateral EIVs.
- 6. Document prominent lymph nodes.
- 7. Document/measure popliteal cysts in three dimensions.
- 8. Make note whether or not thrombus occlusive.

**DVT** is Critical Finding and must be reported STAT.

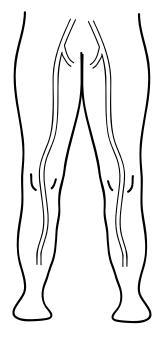
## **Interpretation Criteria**

Venous compression and color Doppler imaging performed on CFV, FV, POP V, PTV, proximal DFV, and proximal GSV. Abnormal findings include incomplete compression of vessel or failure to document color Doppler signal in all or part of vessel lumen. Complete or incomplete occlusion should be documented. Additional findings including (but not limited to) soft tissue edema, masses, or collateral vessels also documented.

INDICATIONS	DATE/TIME	
	SONOGRAPHER	

RIGHT Thrombus		mbus	Findings/Limitations
CFV	+	-	
GSV junction	+	-	
DFV	+	-	
Prox FV	+	-	
Mid FV	+	-	
Dist FV	+	-	
POP V	+	-	
PTV	+	-	

LEFT	Thrombus		Findings/Limitations
CFV	+	-	
GSV junction	+	-	
DFV	+	-	
Prox FV	+	-	
Mid FV	+	-	
Dist FV	+	-	
POP V	+	-	
PTV	+	-	



lacksquare Bilateral CFV or EIV Spectral Doppler waveforms from long axis

Comments	
SONOGRAPHER CONFIRMATION: My signature confirms that instructions have been provided to the conscious patient regarding this exam, that US utilizes sound waves rather than ionizing radiation, and that coupling gel is used to improve the quality of the exam.	Sonographer's Signature

FMC	кмс	СМС	TMC	NHSC	Name / MR # / Label
KIC	MIC	PI	TI		
MFP	SFP	Other			
<b>US Lower Extremity DVT Worksheet</b>			T Worksh		