

**PRE AND POST ELVT WORKSHEET: RIGHT LEG**

Ultrasound Technologist Worksheet Only

The information below IS NOT the final interpretation of the ultrasound exam

Exam Date \_\_\_\_\_ Tech \_\_\_\_\_ Patient Name \_\_\_\_\_

**Reflux is defined as 500 msec (0.5 sec) or greater of reversal flow.**

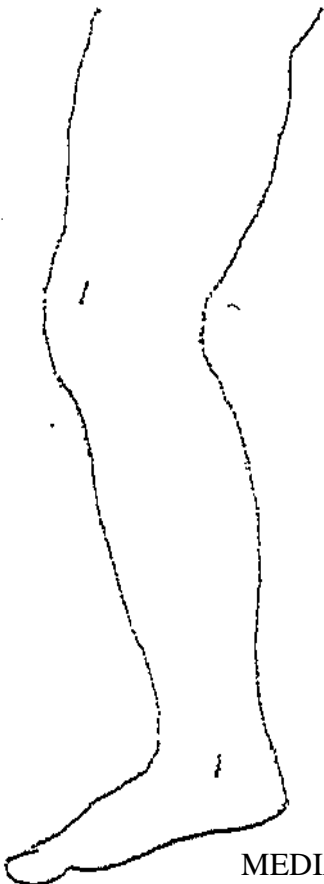
AREA	REFLUX	SECONDS	DVT
RT CFV	YES or NO		YES or NO
RT PROX SFV	YES or NO		YES or NO
RT MID SFV	YES or NO		YES or NO
RT POPLITEAL V	YES or NO		YES or NO

**RIGHT GREATER SAPHENOUS VEIN LATERAL**

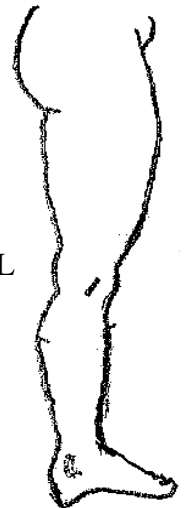
AREA	REFLUX	SECONDS	SIZE
JUNCTION	YES or NO		mm
PROX THIGH	YES or NO		mm
MID THIGH	YES or NO		mm
KNEE	YES or NO		mm
MID CALF	YES or NO		mm

**RIGHT LESSER SAPHENOUS VEIN**

AREA	REFLUX	SECONDS	SIZE
JUNCTION	YES or NO		mm
MID CALF	YES or NO		mm



MEDIAL



LATERAL



POSTERIOR

**EXAM PERFORMED**

Circle one

SUPINE

UPRIGHT

OTHER \_\_\_\_\_

Other Large Refluxing Vein Branches

Location: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Comments

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