

Abdominal Ultrasound Radiology Report

Patient Name: _____ Patient ID: _____

Date of Exam: _____ Referring Physician: _____

Date of Birth: _____ Sex: _____

Clinical History

Technique

Real-time ultrasound imaging of the abdomen was performed.

Findings

Liver: _____

Gallbladder/Biliary tree: _____

Pancreas: _____

Spleen: _____

Kidneys: _____

Aorta/IVC: _____

Other: _____

Impression

Radiologist: _____ Date: _____