

Clinical Indications (Required):

Cardiovascular Risk Factors: (please check)

- High blood pressure
- High cholesterol
- Diabetic
- Heart disease/Arrhythmia
- COPD
- Family history of stroke and/or heart disease
- Smoker
- Other:

Please choose one of three scheduling options below:

- Call patient to schedule
- Patient will call you
- Already scheduled:
Date & Time of Exam: _____

Patient Name

Patient Phone#

DOB

Referring Physician Name

Phone#

Fax#

Referring Physician Signature (Required)

Examination/s Ordered – Please Check Appropriate Exam/s Below

CEREBROVASCULAR EXAMS

- CVE – Cerebrovascular Evaluation Complete
(Carotid / Vertebral Artery duplex and Transcranial Doppler)
- CAR – Carotid / Vertebral Artery duplex
- TCD – Transcranial Doppler
- TCD – PFO Bubble Study (Right to Left Shunt)
- TCD – EMB (Embolitic Monitoring)
 - Anterior
 - Posterior
- TCD – HTS-Head Turn Syncope
- TCD – CO2 Vasomotor Challenge

PERIPHERAL VENOUS EXAMS

- LEV - Lower Extremity Venous Duplex (R/O DVT)
 - Bilateral
 - Right
 - Left
- LEV/IVC/IL – Inferior Vena Cava/Iliac/LEV Duplex
(Includes Iliocaval, femoropopliteal, tibioperoneal)
- LE-VI - LEV Duplex for Venous Insufficiency
 - Bilateral
 - Right
 - Left
- LE-VM - Lower Extremity Vein Mapping (pre-op)
 - Bilateral
 - Right
 - Left
- UEV - Upper Extremity Venous Duplex
 - Bilateral
 - Right
 - Left
- UE-VM - Upper Extremity Vein Mapping (pre-op)
 - Bilateral
 - Right
 - Left
- Pre-op Dialysis Access Site Exam
(Physiologic and Duplex exams)
- Dialysis Access Site Duplex
 - Right
 - Left

ABDOMINAL DUPLEX EXAMS* (check one only)

- AO/IL – Aorta-Iliac (AAA)
 - REN – Renal Artery
 - MES – Mesenteric Artery
 - POR – Hepato-Portal Veins
- *8 hour Fasting required (except for diabetics)**

PERIPHERAL ARTERIAL EXAMS

- LEA - Lower Extremity Arterial Evaluation
(Physiologic testing - ABI's, Treadmill)
(Duplex prn – Aorta/Iliac, Femopopliteal & tibioperoneal)
- GRD - Groin limited duplex, (R/O PSAN)
 - Right
 - Left
- BPG – Bypass Graft Duplex (includes ABI's and Treadmill prn)
 - Bilateral
 - Right
 - Left
- UEA - Upper Extremity Arterial Evaluation
(Physiologic testing- Arm pressures)
(Duplex prn – Sub, Ax, Brachial, Radial, Ulnar)
- UEA – Radial Artery Assessment (pre-CABG)
- TOS - Thoracic Outlet (Physiologic and limited duplex)
- DI – Extremity Digit Testing
 - Upper
 - Lower
 - Bilateral
 - Right
 - Left

Other Requests or Special Instructions:
