

1600 Phillips Road Tallahassee, Florida 32308 850-878-4127 Phone 850-878-9729 Fax

TO AVOID RESCHEDULING, BRING THIS FORM TO YOUR APPOINTMENT (PLEASE DO NOT BRING UNATTENDED CHILDREN)

Name	D.O.B.	
Referring Facility		
Contact & Direct Line		
Physician's Signature		
Physician's Printed Name	Date	
Appointment Date	Time	
Pertinent History/Clinical Indication		
□ Abdominal U/S – includes gallbladder, bile duc □ Gallbladder/Liver RUQ U/S – includes gallbladder □ Aorta U/S □ Single Organ U/S	er, bile ducts, porta hepatis, liver and pancreas.	NOTHING TO EAT OR DRINK AFTER MIDNIGHT
☐ Renal U/S (Kidneys & Bladder) Finish Drinking 1 quart of water (four 80z. glas DO NOT GO TO THE BATHROOM. It is ve	sses) 60 MINUTES PRIOR TO EXAM.	WELL Hydrated
	☐ Testicular with Doppler U/S	No Preparation
EXTREMITY VENOUS STUDIES Lower Extremity Venous Study for DVT. Upper Extremity Venous Study for DVT. R Acute or chronic embolism/thrombosis Extremity Pain Extremity swelling S Varicose Veins Varicose Veins O Other	R L D Bilateral	No Preparation
EXTREMITY ARTERIAL EXAMS Ankle Brachial Index – Bilateral Ankle Brachial Indices with Exercise – Bil Lower Extremity Ankle Brachial Index Seg Upper Extremity Segmentals – Bilateral Upper Extremity Exam for Thoracic Outlet Atherosclerosis Diabetes mellitus with other circulatory Non-pressure chronic ulcer	gmentals – Bilateral t Syndrome – Bilateral y complications Peripheral Vascular Disea	No PREPARATION
N □ Vascular injury CAROTID DUPLEX	U Other	No
Amaurosis Fugax □ Aneurysm Bruit □ CVA/Stroke □ Known Carotid Stenosis N □ Previous Carotid Endarterectomy	☐ Facial Weakness ☐ Slurred Speech ☐ Subclavian Steal ☐ Vertebral Basil ☐ Syncope & Collapse ☐ Visual Disturb ☐ TIA ☐ Unsteadiness on Feet ☐ Other ☐	
_ III.III Carolia Endaronomy	TOOLS, 1981 - 1991 April 1991 April 1991 April 1991 April 1991 - 1991 April 1	