









# Renal Ultrasound

Patient Name _____		Date of Exam _____	
<b>History</b>			
Stones _____		Hematuria _____	
Surgery _____		UTI _____	
Diagnosis _____			
<b>Renal Ultrasound Findings</b>			
		<b>Hydronephrosis</b>	
Right Kidney _____ x _____ x _____		No Hydro	Mild    Moderate    Severe
Left Kidney _____ x _____ x _____		No Hydro	Mild    Moderate    Severe
<b>Right</b> Superior  Mid  Inferior  	<b>Left</b>  Superior  Mid  Inferior 		
Cortex _____ cm		Cortex _____ cm	
<b>Cysts</b>			
Right		Left	
1. _____		1. _____	
2. _____		2. _____	
3. _____		3. _____	
<b>Ureteral Jets Identified</b>			
Right _____		Left _____	
<b>Bladder</b>			
Pre-void _____		Post-void _____	
<b>Sonographer</b> _____			