

# OB Limited US Technologist Worksheet

**St Vincents** Riverside Southside Clay St Johns Imaging Center Arlington ER Westside ER  
**Optimal** Forbes Southside Clay Mandarin Westside St Johns Town Center Orange Park

Patient Name: \_\_\_\_\_ MMI: \_\_\_\_\_ Age: \_\_\_\_\_

History/Symptoms:				LMP	G
				P	
				# Spont Abort:	
Pelvic Pain	Vomiting	Vaginal Discharge	Confirm Pregnancy	# Elect Abort:	
R	L	Vaginal Bleeding	Leaking Fluid	Transabominal Scan	
Nausea	Heavy Bleeding	Pelvic Trauma	Assess Fetal Viability	Endovaginal Scan	

	Number	Presentation	
<b>Fetus</b>		vertex	breech
		trans	variable

	Grade	Location	
<b>Placenta</b>		anterior	fundal
		posterior	previa

	cm	weeks	days
<b>BPD</b>			
<b>HC</b>			
<b>AC</b>			
<b>FL</b>			
Estimated Gestational Age			

<b>AFI</b>	wnl (5-24 cm)	abnl
<b>Cervix</b>	cm	closed    opened

<b>Right Ovary/Adnexa</b>	wnl	abnl	ltd
<b>Left Ovary/Adnexa</b>	wnl	abnl	ltd

Estimated Delivery Date	
Fetal Heart Motion	bpm    none
Estimated Fetal Weight	gm

<b>Free Fluid</b>	none	moderate
	trace	large
	small	

Sonographer's Impression: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Sonographer's Name, Date & Time: \_\_\_\_\_ # Images \_\_\_\_\_