

UT Southwestern Department of Radiology

Ultrasound - Abdomen Limited for Ascites, VP Shunt, or Abscess Evaluation

PURPOSE:

To evaluate the abdominal and pelvis for ascites, pseudocyst, or abscess.

SCOPE:

Applies to all ultrasound abdomen limited for ascites, VP Shunt, or abscess evaluation studies performed at Imaging Services / Radiology

INDICATIONS:

- Signs, symptoms, or other imaging studies suggestive of ascites or abscess.
- Conditions associated with ascites (eg liver diseases; renal diseases; heart diseases)
- Follow up of known ascites or abscess
- History of VP Shunt placement or complications.
- Post op evaluation

EQUIPMENT:

Curved or linear transducer with a frequency range of approximately 2-9 MHz that allows for appropriate penetration and resolution depending on patient's body habitus. Starting with a high frequency transducer and switching to a lower frequency transducer if needed.

PATIENT PREPARATION:

- None

EXAMINATION:

GENERAL GUIDELINES:

A complete examination includes evaluation of the abdomen and pelvis for free or loculated fluid

EXAM INITIATION:

- Review prior exams, VP shunt tip must be evaluated in prior x-ray.
- Introduce yourself to the patient
- Verify patient identity using patient name and DOB
- Explain test (AIDET)
- Obtain patient history including symptoms. Enter and store data page
- Place patient in supine position

TECHNIQUE CONSIDERATIONS:

- Evaluate RUQ with attention to fluid peripheral to the liver and in the subhepatic space
- Evaluate LUQ with attention to fluid peripheral to the spleen
- Evaluate RLQ and LLQ for fluid in the paracolic gutters
- Evaluate Epigastric area around pancreas
- Evaluate periumbilical area
- Evaluate midline pelvis for pelvic free fluid

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DOCUMENTATION:

- Longitudinal and transverse images:
 - o RUQ
 - o LUQ
 - o RLQ
 - o LLQ
 - o Midline pelvis
- Periumbilical area
- Epigastric area
- *Provide stationary cine and compression images to show mobility of debris or abscess, if present along with Color Doppler.*
- *Document the extent and location of any fluid identified*

REVISION HISTORY:

SUBMITTED BY:	Christy Baez, RDMS, RVT	Title: Lead Tech-Dallas	
APPROVED BY:	Jeannie Kwon, M.D.	Director of Ultrasound	
	Samantha Lewis	Ultrasound Team Leader-Plano	
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