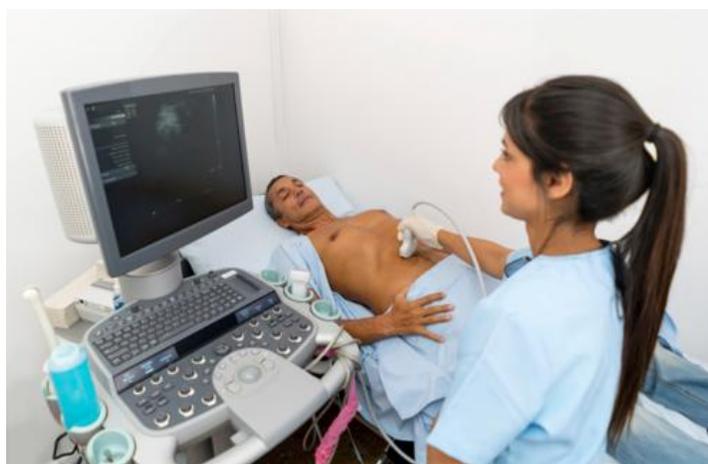




## General Ultrasound

Ultrasound imaging uses sound waves to produce pictures of the inside of the body. It is used to help diagnose the causes of pain, swelling and infection in the body's internal organs and to examine a baby in pregnant women and the brain and hips in infants. It's also used to help guide biopsies, diagnose heart conditions, and assess damage after a heart attack. Ultrasound is safe, noninvasive, and does not use ionizing radiation.



This procedure requires little to no special preparation. Your doctor will instruct you on how to prepare, including whether you should refrain from eating or drinking beforehand. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.

## What is General Ultrasound Imaging?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

Conventional ultrasound displays the images in thin, flat sections of the body. Advancements in ultrasound technology include three-dimensional (3-D) ultrasound that formats the sound wave data into 3-D images.

A Doppler ultrasound study may be part of an ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

There are three types of Doppler ultrasound:

- Color Doppler uses a computer to convert Doppler measurements into an array of colors to show the speed and direction of blood flow through a blood vessel.
- Power Doppler is a newer technique that is more sensitive than color Doppler and capable of providing greater detail of blood flow, especially when blood flow is little or minimal. Power Doppler, however, does not help the radiologist determine the direction of blood flow, which may be important in some situations.
- Spectral Doppler displays blood flow measurements graphically, in terms of the distance traveled per unit of time, rather than as a color picture. It can also convert blood flow information into a distinctive sound that can be heard with every heartbeat.

## What are some common uses of the procedure?

Ultrasound examinations can help to diagnose a variety of conditions and to assess organ damage following illness.

Ultrasound is used to help physicians evaluate symptoms such as:

- pain
- swelling
- infection

Ultrasound is a useful way of examining many of the body's internal organs, including but not limited to the:

- heart and blood vessels, including the abdominal aorta and its major branches
- liver
- gallbladder
- spleen
- pancreas
- kidneys
- bladder
- uterus, ovaries, and unborn child (fetus) in pregnant patients
- eyes
- thyroid and parathyroid glands
- scrotum (testicles)
- brain in infants
- hips in infants
- spine in infants

Ultrasound is also used to:

- guide procedures such as needle biopsies, in which needles are used to sample cells from an abnormal area for laboratory testing.
- image the breasts and guide biopsy of breast cancer (see the Ultrasound-Guided Breast Biopsy page).
- diagnose a variety of heart conditions, including valve problems and congestive heart failure, and to assess damage after a heart attack. Ultrasound of the heart is commonly called an “echocardiogram” or “echo” for short.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

With knowledge about the speed and volume of blood flow gained from a Doppler ultrasound image, the physician can often determine whether a patient is a good candidate for a procedure like angioplasty.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Preparation for the procedure will depend on the type of examination you will have. For some scans your doctor may instruct you not to eat or drink for as many as 12 hours before your appointment. For others you may be asked to drink up to six glasses of water two hours prior to your exam and avoid urinating so that your bladder is full when the scan begins.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small

amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Doppler sonography is performed using the same transducer.

Rarely, young children may need to be sedated in order to hold still for the procedure. Parents should ask about this beforehand and be made aware of food and drink restrictions that may be needed prior to sedation.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

In some ultrasound studies, the transducer is attached to a probe and inserted into a natural opening in the body. These exams include:

- **Transesophageal echocardiogram.** The transducer is inserted into the esophagus to obtain images of the heart.
- **Transrectal ultrasound.** The transducer is inserted into a man's rectum to view the prostate.
- **Transvaginal ultrasound.** The transducer is inserted into a woman's vagina to view the uterus and ovaries.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

Ultrasound exams in which the transducer is inserted into an opening of the body may produce minimal discomfort.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Most ultrasound examinations are completed within 30 minutes, although more extensive exams may take up to an hour.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up

examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound is the preferred imaging modality for the diagnosis and monitoring of pregnant women and their unborn babies.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of General Ultrasound Imaging?

Ultrasound waves are disrupted by air or gas; therefore ultrasound is not an ideal imaging technique for air-filled bowel or organs obscured by the bowel. In most cases, barium exams, CT scanning, and MRI are the methods of choice in such a setting.

Large patients are more difficult to image by ultrasound because greater amounts of tissue attenuate (weaken) the sound waves as they pass deeper into the body and need to be returned to the transducer for analysis.

Ultrasound has difficulty penetrating bone and, therefore, can only see the outer surface of bony structures and not what lies within (except in infants who have more cartilage in their skeletons than older children or adults). For visualizing internal structure of bones or certain joints, other imaging modalities such as MRI are typically used.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

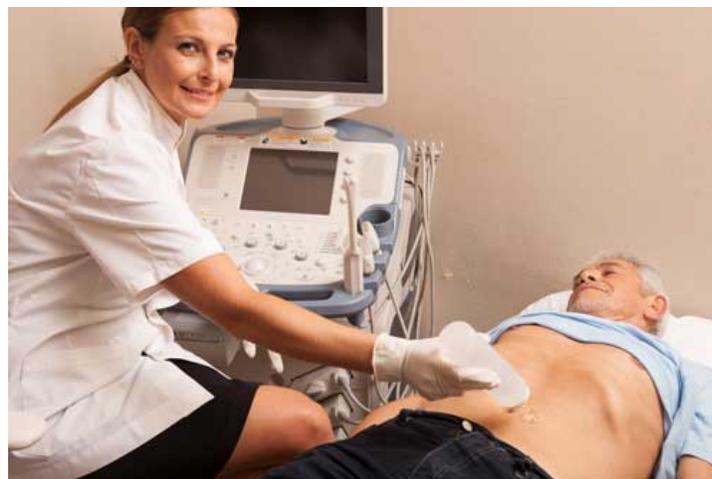
This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Abdomen

Ultrasound imaging of the abdomen uses sound waves to produce pictures of the structures within the upper abdomen. It is used to help diagnose pain or distention (enlargement) and evaluate the kidneys, liver, gallbladder, bile ducts, pancreas, spleen and abdominal aorta. Ultrasound is safe, noninvasive and does not use ionizing radiation.



This procedure requires little to no special preparation. Your doctor will instruct you on how to prepare, including whether you should refrain from eating or drinking beforehand.

Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.

## What is Ultrasound Imaging of the Abdomen?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

An abdominal ultrasound produces a picture of the organs and other structures in the upper abdomen.

A Doppler ultrasound study may be part of an abdominal ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

Abdominal ultrasound imaging is performed to evaluate the:

- kidneys
- liver
- gallbladder
- bile ducts
- pancreas
- spleen
- abdominal aorta and other blood vessels of the abdomen

Ultrasound is used to help diagnose a variety of conditions, such as:

- abdominal pain or distention (enlargement)
- abnormal liver function
- enlarged abdominal organ
- kidney stones
- gallstones
- an abdominal aortic aneurysm (AAA)

Additionally, ultrasound may be used to provide guidance for biopsies.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Preparations depend on the type of ultrasound you are having.

- For a study of the liver, gallbladder, spleen, and pancreas, you may be asked to eat a fat-free meal on the evening before the test and then to avoid eating for eight to 12 hours before the test.
- For ultrasound of the kidneys, you may be asked to drink four to six glasses of liquid about an hour before the test to fill your bladder. You may be asked to avoid eating for eight to 12 hours before the test to avoid gas buildup in the intestines.

- For ultrasound of the aorta, you may need to avoid eating for eight to 12 hours before the test.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Doppler sonography is performed using the same transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

Abdominal ultrasound is usually completed within 30 minutes.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further

evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Abdominal Ultrasound Imaging?

Ultrasound waves are disrupted by air or gas; therefore ultrasound is not an ideal imaging technique for air-filled bowel or organs obscured by the bowel. In most cases, barium exams, CT scanning, and MRI are the methods of choice in such a setting.

Large patients are more difficult to image by ultrasound because greater amounts of tissue attenuate (weaken) the sound waves as they pass deeper into the body and need to be returned to the transducer for analysis.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

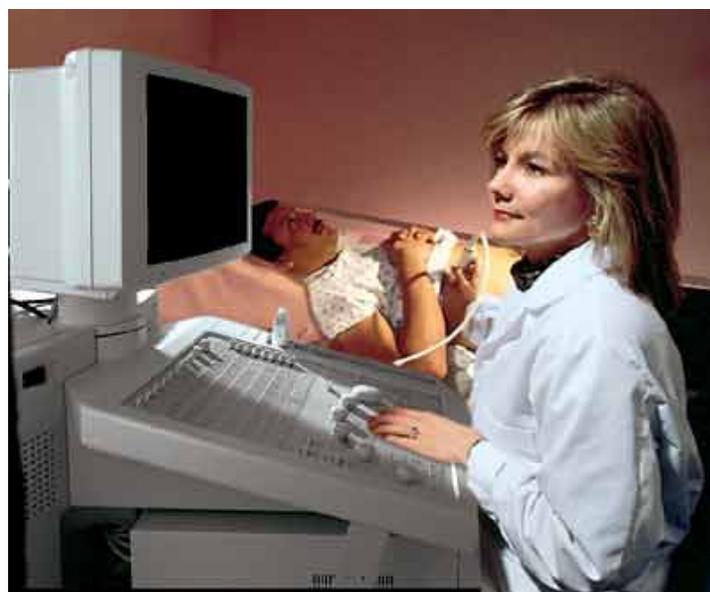
Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Musculoskeletal

Ultrasound imaging uses sound waves to produce pictures of muscles, tendons, ligaments and joints throughout the body. It is used to help diagnose sprains, strains, tears, and other soft tissue conditions. Ultrasound is safe, noninvasive, and does not use ionizing radiation.

This procedure requires little to no special preparation. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



### What is Ultrasound Imaging of the Musculoskeletal System?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

Ultrasound images of the musculoskeletal system provide pictures of muscles, tendons, ligaments, joints, and soft tissues throughout the body.

### What are some common uses of the procedure?

Ultrasound images are typically used to help diagnose:

- tendon tears, or tendinitis of the rotator cuff in the shoulder, Achilles tendon in the ankle and other tendons throughout the body.
  - muscle tears, masses or fluid collections.
  - ligament sprains or tears.
  - inflammation or fluid (effusions) within the bursae and joints.
  - early changes of rheumatoid arthritis.
  - nerve entrapments such as carpal tunnel syndrome.
  - benign and malignant soft tissue tumors.
  - ganglion cysts.
  - hernias.
  - foreign bodies in the soft tissues (such as splinters or glass).
- 
- dislocations of the hip in infants.
  - fluid in a painful hip joint in children.
  - neck muscle abnormalities in infants with torticollis (neck twisting).
  - soft tissue masses (lumps/bumps) in children.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

No other preparation is required.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or

television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

## How is the procedure performed?

For certain ultrasound examinations of the musculoskeletal system, the patient may be seated on an examination table or a swivel chair. For other ultrasound exams, the patient is positioned lying face-up or face-down on an examination table. The radiologist or sonographer may ask you to move the extremity being examined or may move it for you to evaluate the anatomy and function of the joint, muscle, ligament or tendon.

Most ultrasound studies of infants and children are performed with the child lying on his or her back on the examination table, but other positions may be required.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

Musculoskeletal ultrasound examination is usually completed within 15 to 30 minutes but may occasionally take longer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.

- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.
  - Patients with cardiac pacemakers and certain types of metallic implants or fragments in the body cannot be safely exposed to the strong magnetic field required for magnetic resonance imaging (MRI); however, patients can safely receive ultrasound imaging.
  - Ultrasound is also an excellent alternative to MRI for claustrophobic patients.
  - Compared to MRI, ultrasound may provide greater internal detail when assessing soft tissue structures such as tendons and nerves.
  - Because ultrasound images are captured in real time, they can show the movement of a soft tissue structure such as a tendon, joint or an extremity.
- 
- Ultrasound imaging is faster than MRI and does not require the patient to remain completely still, allowing infants to be imaged without sedation.
  - The hip joints of infants, unlike those of adults, are largely made of cartilage. Ultrasound is able to clearly see cartilage.

## Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Ultrasound Imaging of the Musculoskeletal System?

Ultrasound has difficulty penetrating bone and, therefore, can only see the outer surface of bony structures and not what lies within (except in infants who have more cartilage in their skeletons than older children or adults). For visualizing internal structure of bones or certain joints, other imaging modalities such as MRI are typically used.

There are also limitations to the depth that sound waves can penetrate; therefore, deeper structures in larger patients may not be seen easily.

Ultrasound has not proven useful in detecting whiplash injuries or most other causes of back pain.

## Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Pelvis

Ultrasound imaging of the pelvis uses sound waves to produce pictures of the structures and organs in the lower abdomen and pelvis. There are three types of pelvic ultrasound: abdominal, vaginal (for women), and rectal (for men). These exams are frequently used to evaluate the reproductive and urinary systems. Ultrasound is safe, noninvasive and does not use ionizing radiation.



This procedure requires little to no special preparation. You may be asked to drink water prior to the examination to fill your bladder. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.

## What is Pelvic Ultrasound Imaging?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

There are three types of pelvic ultrasound:

- abdominal (transabdominal)
- vaginal (transvaginal/endovaginal) for women
- rectal (transrectal) for men

A Doppler ultrasound exam may be part of a pelvic ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

In women, a pelvic ultrasound is most often performed to evaluate the:

- uterus
- cervix
- ovaries
- fallopian tubes
- bladder

Pelvic ultrasound exams are also used to monitor the health and development of an embryo or fetus during pregnancy. See the Obstetrical Ultrasound page for more information.

Ultrasound examinations can help diagnose symptoms experienced by women such as:

- pelvic pain
- abnormal vaginal bleeding
- other menstrual problems

Ultrasound exams also help identify:

- palpable masses such as ovarian cysts and uterine fibroids
- ovarian or uterine cancers

A transvaginal ultrasound is usually performed to view the endometrium (the lining of the uterus) and the ovaries. Transvaginal ultrasound also evaluates the myometrium (muscular walls of the uterus).

Sonohysterography allows for a more in-depth investigation of the uterine cavity. Three-dimensional (3-D) ultrasound permits evaluation of the uterus and ovaries in planes that cannot be imaged directly. These exams are typically performed to detect:

- uterine anomalies
- uterine scars
- endometrial polyps
- fibroids
- cancer, especially in patients with abnormal uterine bleeding

Some physicians also use 3-D ultrasound or sonohysterography for patients with infertility. In this setting, three-dimensional ultrasound provides information about the outer contour of the uterus and about uterine irregularities. See the Sonohysterography page for more information.

In men, a pelvic ultrasound is used to evaluate the:

- bladder

- seminal vesicles
- prostate

Transrectal ultrasound, a special study usually done to provide detailed evaluation of the prostate gland, involves inserting a specialized ultrasound transducer into a man's rectum. See the Prostate Ultrasound page for more information.

In men and women, a pelvic ultrasound exam can help identify:

- kidney stones
- bladder tumors
- other disorders of the urinary bladder

In children, pelvic ultrasound can help evaluate:

- pelvic masses
- pelvic pain
- ambiguous genitalia and anomalies of pelvic organs
- early or delayed puberty in girls

Pelvic ultrasound is also used to guide procedures such as needle biopsies, in which needles are used to extract a sample of cells from organs for laboratory testing.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

For ultrasound procedures requiring insertion of the transducer, such as transvaginal or transrectal exams, the device is covered with a sheath and lubricated before insertion.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

The same principles apply to ultrasound procedures such as transrectal and transvaginal which require insertion of a special transducer into the body.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

### **Transabdominal:**

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

### **Transvaginal:**

Transvaginal ultrasound is performed very much like a gynecologic exam and involves the insertion of the transducer into the vagina after you empty your bladder. The tip of the transducer is smaller than the standard speculum used when performing a Pap test. A protective cover is placed over the transducer, lubricated with a small amount of gel, and then inserted into the vagina. Only two to three inches of the transducer end are inserted into the vagina. The images are obtained from different orientations to get the best views of the uterus and ovaries. Transvaginal ultrasound is usually performed with you lying on your back, possibly with your feet in stirrups similar to a gynecologic exam.

### **Transrectal:**

For a transrectal ultrasound, a protective cover is placed over the transducer. It is lubricated and then placed into the rectum.

Usually, you lie on your side, facing away from the examiner, with your knees and hips slightly flexed.

Doppler sonography is performed using the same transducer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

## What will I experience during and after the procedure?

**For a transabdominal exam:**

A clear water-based gel is applied to the abdomen. A transducer is moved back and forth over this area until the desired images are captured.

Ultrasound examinations are painless and easily tolerated by most patients.

**For a transvaginal exam:**

With transvaginal ultrasound, although the examination is often performed to look for a cause of pelvic pain, the sonogram itself should not be painful or significantly increase your discomfort. A vaginal sonogram is usually more comfortable than a manual gynecologic examination.

**For a transrectal exam:**

If no biopsy is required, transrectal ultrasound of the prostate is similar to or may have less discomfort than a rectal exam performed by your doctor.

If a biopsy is performed, additional discomfort (due to the needle insertion) is usually minimal because the rectal wall is relatively insensitive to the pain in the region of the prostate. A biopsy will add time to the procedure.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

These ultrasound examinations are usually completed within 30 minutes.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound is the preferred imaging modality for the diagnosis and monitoring of pregnant women and their unborn babies.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.
- Pelvic ultrasound can help to identify and evaluate a variety of urinary and reproductive system disorders in both sexes without x-ray exposure.

## Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Pelvic Ultrasound Imaging?

Ultrasound waves are disrupted by air or gas; therefore ultrasound is not an ideal imaging technique for air-filled bowel or organs obscured by the bowel. In most cases, barium exams, CT scanning, and MRI are the methods of choice in such a setting.

Large patients are more difficult to image by ultrasound because greater amounts of tissue attenuate (weaken) the sound waves as they pass deeper into the body and need to be returned to the transducer for analysis.

## Additional Information and Resources

### RTAnswers.org

Radiation Therapy for Gynecologic Cancers

Radiation Therapy for Prostate Cancer

## Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information

for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

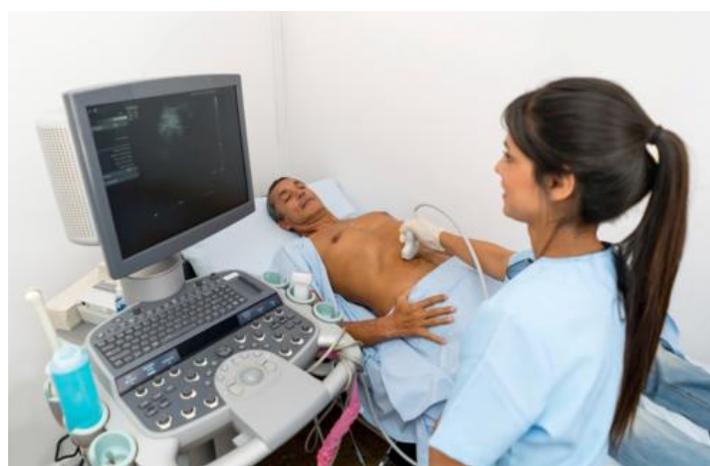
This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## General Ultrasound

Ultrasound imaging uses sound waves to produce pictures of the inside of the body. It is used to help diagnose the causes of pain, swelling and infection in the body's internal organs and to examine a baby in pregnant women and the brain and hips in infants. It's also used to help guide biopsies, diagnose heart conditions, and assess damage after a heart attack. Ultrasound is safe, noninvasive, and does not use ionizing radiation.



This procedure requires little to no special preparation. Your doctor will instruct you on how to prepare, including whether you should refrain from eating or drinking beforehand. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.

## What is General Ultrasound Imaging?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

Conventional ultrasound displays the images in thin, flat sections of the body. Advancements in ultrasound technology include three-dimensional (3-D) ultrasound that formats the sound wave data into 3-D images.

A Doppler ultrasound study may be part of an ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

There are three types of Doppler ultrasound:

- Color Doppler uses a computer to convert Doppler measurements into an array of colors to show the speed and direction of blood flow through a blood vessel.
- Power Doppler is a newer technique that is more sensitive than color Doppler and capable of providing greater detail of blood flow, especially when blood flow is little or minimal. Power Doppler, however, does not help the radiologist determine the direction of blood flow, which may be important in some situations.
- Spectral Doppler displays blood flow measurements graphically, in terms of the distance traveled per unit of time, rather than as a color picture. It can also convert blood flow information into a distinctive sound that can be heard with every heartbeat.

## What are some common uses of the procedure?

Ultrasound examinations can help to diagnose a variety of conditions and to assess organ damage following illness.

Ultrasound is used to help physicians evaluate symptoms such as:

- pain
- swelling
- infection

Ultrasound is a useful way of examining many of the body's internal organs, including but not limited to the:

- heart and blood vessels, including the abdominal aorta and its major branches
- liver
- gallbladder
- spleen
- pancreas
- kidneys
- bladder
- uterus, ovaries, and unborn child (fetus) in pregnant patients
- eyes
- thyroid and parathyroid glands
- scrotum (testicles)
- brain in infants
- hips in infants
- spine in infants

Ultrasound is also used to:

- guide procedures such as needle biopsies, in which needles are used to sample cells from an abnormal area for laboratory testing.
- image the breasts and guide biopsy of breast cancer (see the Ultrasound-Guided Breast Biopsy page).
- diagnose a variety of heart conditions, including valve problems and congestive heart failure, and to assess damage after a heart attack. Ultrasound of the heart is commonly called an “echocardiogram” or “echo” for short.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

With knowledge about the speed and volume of blood flow gained from a Doppler ultrasound image, the physician can often determine whether a patient is a good candidate for a procedure like angioplasty.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Preparation for the procedure will depend on the type of examination you will have. For some scans your doctor may instruct you not to eat or drink for as many as 12 hours before your appointment. For others you may be asked to drink up to six glasses of water two hours prior to your exam and avoid urinating so that your bladder is full when the scan begins.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small

amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Doppler sonography is performed using the same transducer.

Rarely, young children may need to be sedated in order to hold still for the procedure. Parents should ask about this beforehand and be made aware of food and drink restrictions that may be needed prior to sedation.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

In some ultrasound studies, the transducer is attached to a probe and inserted into a natural opening in the body. These exams include:

- **Transesophageal echocardiogram.** The transducer is inserted into the esophagus to obtain images of the heart.
- **Transrectal ultrasound.** The transducer is inserted into a man's rectum to view the prostate.
- **Transvaginal ultrasound.** The transducer is inserted into a woman's vagina to view the uterus and ovaries.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

Ultrasound exams in which the transducer is inserted into an opening of the body may produce minimal discomfort.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Most ultrasound examinations are completed within 30 minutes, although more extensive exams may take up to an hour.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up

examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound is the preferred imaging modality for the diagnosis and monitoring of pregnant women and their unborn babies.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of General Ultrasound Imaging?

Ultrasound waves are disrupted by air or gas; therefore ultrasound is not an ideal imaging technique for air-filled bowel or organs obscured by the bowel. In most cases, barium exams, CT scanning, and MRI are the methods of choice in such a setting.

Large patients are more difficult to image by ultrasound because greater amounts of tissue attenuate (weaken) the sound waves as they pass deeper into the body and need to be returned to the transducer for analysis.

Ultrasound has difficulty penetrating bone and, therefore, can only see the outer surface of bony structures and not what lies within (except in infants who have more cartilage in their skeletons than older children or adults). For visualizing internal structure of bones or certain joints, other imaging modalities such as MRI are typically used.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

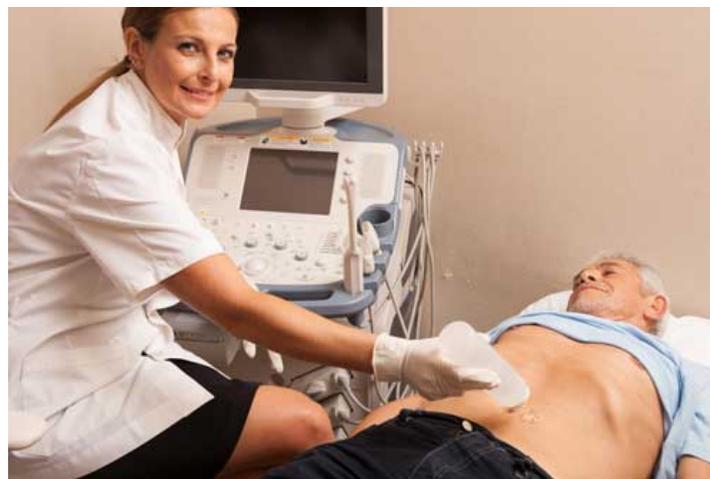
This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Abdomen

Ultrasound imaging of the abdomen uses sound waves to produce pictures of the structures within the upper abdomen. It is used to help diagnose pain or distention (enlargement) and evaluate the kidneys, liver, gallbladder, bile ducts, pancreas, spleen and abdominal aorta. Ultrasound is safe, noninvasive and does not use ionizing radiation.



This procedure requires little to no special preparation. Your doctor will instruct you on how to prepare, including whether you should refrain from eating or drinking beforehand.

Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.

## What is Ultrasound Imaging of the Abdomen?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

An abdominal ultrasound produces a picture of the organs and other structures in the upper abdomen.

A Doppler ultrasound study may be part of an abdominal ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

Abdominal ultrasound imaging is performed to evaluate the:

- kidneys
- liver
- gallbladder
- bile ducts
- pancreas
- spleen
- abdominal aorta and other blood vessels of the abdomen

Ultrasound is used to help diagnose a variety of conditions, such as:

- abdominal pain or distention (enlargement)
- abnormal liver function
- enlarged abdominal organ
- kidney stones
- gallstones
- an abdominal aortic aneurysm (AAA)

Additionally, ultrasound may be used to provide guidance for biopsies.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Preparations depend on the type of ultrasound you are having.

- For a study of the liver, gallbladder, spleen, and pancreas, you may be asked to eat a fat-free meal on the evening before the test and then to avoid eating for eight to 12 hours before the test.
- For ultrasound of the kidneys, you may be asked to drink four to six glasses of liquid about an hour before the test to fill your bladder. You may be asked to avoid eating for eight to 12 hours before the test to avoid gas buildup in the intestines.

- For ultrasound of the aorta, you may need to avoid eating for eight to 12 hours before the test.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Doppler sonography is performed using the same transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

Abdominal ultrasound is usually completed within 30 minutes.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further

evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Abdominal Ultrasound Imaging?

Ultrasound waves are disrupted by air or gas; therefore ultrasound is not an ideal imaging technique for air-filled bowel or organs obscured by the bowel. In most cases, barium exams, CT scanning, and MRI are the methods of choice in such a setting.

Large patients are more difficult to image by ultrasound because greater amounts of tissue attenuate (weaken) the sound waves as they pass deeper into the body and need to be returned to the transducer for analysis.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

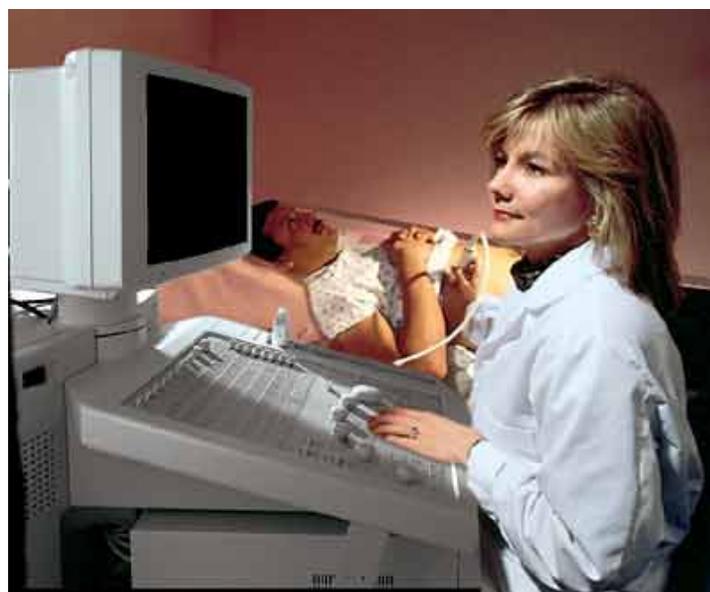
Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Musculoskeletal

Ultrasound imaging uses sound waves to produce pictures of muscles, tendons, ligaments and joints throughout the body. It is used to help diagnose sprains, strains, tears, and other soft tissue conditions. Ultrasound is safe, noninvasive, and does not use ionizing radiation.

This procedure requires little to no special preparation. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



### What is Ultrasound Imaging of the Musculoskeletal System?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

Ultrasound images of the musculoskeletal system provide pictures of muscles, tendons, ligaments, joints, and soft tissues throughout the body.

### What are some common uses of the procedure?

Ultrasound images are typically used to help diagnose:

- tendon tears, or tendinitis of the rotator cuff in the shoulder, Achilles tendon in the ankle and other tendons throughout the body.
  - muscle tears, masses or fluid collections.
  - ligament sprains or tears.
  - inflammation or fluid (effusions) within the bursae and joints.
  - early changes of rheumatoid arthritis.
  - nerve entrapments such as carpal tunnel syndrome.
  - benign and malignant soft tissue tumors.
  - ganglion cysts.
  - hernias.
  - foreign bodies in the soft tissues (such as splinters or glass).
- 
- dislocations of the hip in infants.
  - fluid in a painful hip joint in children.
  - neck muscle abnormalities in infants with torticollis (neck twisting).
  - soft tissue masses (lumps/bumps) in children.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

No other preparation is required.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or

television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

## How is the procedure performed?

For certain ultrasound examinations of the musculoskeletal system, the patient may be seated on an examination table or a swivel chair. For other ultrasound exams, the patient is positioned lying face-up or face-down on an examination table. The radiologist or sonographer may ask you to move the extremity being examined or may move it for you to evaluate the anatomy and function of the joint, muscle, ligament or tendon.

Most ultrasound studies of infants and children are performed with the child lying on his or her back on the examination table, but other positions may be required.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

Musculoskeletal ultrasound examination is usually completed within 15 to 30 minutes but may occasionally take longer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.

- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.
  - Patients with cardiac pacemakers and certain types of metallic implants or fragments in the body cannot be safely exposed to the strong magnetic field required for magnetic resonance imaging (MRI); however, patients can safely receive ultrasound imaging.
  - Ultrasound is also an excellent alternative to MRI for claustrophobic patients.
  - Compared to MRI, ultrasound may provide greater internal detail when assessing soft tissue structures such as tendons and nerves.
  - Because ultrasound images are captured in real time, they can show the movement of a soft tissue structure such as a tendon, joint or an extremity.
- 
- Ultrasound imaging is faster than MRI and does not require the patient to remain completely still, allowing infants to be imaged without sedation.
  - The hip joints of infants, unlike those of adults, are largely made of cartilage. Ultrasound is able to clearly see cartilage.

## Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Ultrasound Imaging of the Musculoskeletal System?

Ultrasound has difficulty penetrating bone and, therefore, can only see the outer surface of bony structures and not what lies within (except in infants who have more cartilage in their skeletons than older children or adults). For visualizing internal structure of bones or certain joints, other imaging modalities such as MRI are typically used.

There are also limitations to the depth that sound waves can penetrate; therefore, deeper structures in larger patients may not be seen easily.

Ultrasound has not proven useful in detecting whiplash injuries or most other causes of back pain.

## Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Pelvis

Ultrasound imaging of the pelvis uses sound waves to produce pictures of the structures and organs in the lower abdomen and pelvis. There are three types of pelvic ultrasound: abdominal, vaginal (for women), and rectal (for men). These exams are frequently used to evaluate the reproductive and urinary systems. Ultrasound is safe, noninvasive and does not use ionizing radiation.



This procedure requires little to no special preparation. You may be asked to drink water prior to the examination to fill your bladder. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.

## What is Pelvic Ultrasound Imaging?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

There are three types of pelvic ultrasound:

- abdominal (transabdominal)
- vaginal (transvaginal/endovaginal) for women
- rectal (transrectal) for men

A Doppler ultrasound exam may be part of a pelvic ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

In women, a pelvic ultrasound is most often performed to evaluate the:

- uterus
- cervix
- ovaries
- fallopian tubes
- bladder

Pelvic ultrasound exams are also used to monitor the health and development of an embryo or fetus during pregnancy. See the Obstetrical Ultrasound page for more information.

Ultrasound examinations can help diagnose symptoms experienced by women such as:

- pelvic pain
- abnormal vaginal bleeding
- other menstrual problems

Ultrasound exams also help identify:

- palpable masses such as ovarian cysts and uterine fibroids
- ovarian or uterine cancers

A transvaginal ultrasound is usually performed to view the endometrium (the lining of the uterus) and the ovaries. Transvaginal ultrasound also evaluates the myometrium (muscular walls of the uterus).

Sonohysterography allows for a more in-depth investigation of the uterine cavity. Three-dimensional (3-D) ultrasound permits evaluation of the uterus and ovaries in planes that cannot be imaged directly.

These exams are typically performed to detect:

- uterine anomalies
- uterine scars
- endometrial polyps
- fibroids
- cancer, especially in patients with abnormal uterine bleeding

Some physicians also use 3-D ultrasound or sonohysterography for patients with infertility. In this setting, three-dimensional ultrasound provides information about the outer contour of the uterus and about uterine irregularities. See the Sonohysterography page for more information.

In men, a pelvic ultrasound is used to evaluate the:

- bladder

- seminal vesicles
- prostate

Transrectal ultrasound, a special study usually done to provide detailed evaluation of the prostate gland, involves inserting a specialized ultrasound transducer into a man's rectum. See the Prostate Ultrasound page for more information.

In men and women, a pelvic ultrasound exam can help identify:

- kidney stones
- bladder tumors
- other disorders of the urinary bladder

In children, pelvic ultrasound can help evaluate:

- pelvic masses
- pelvic pain
- ambiguous genitalia and anomalies of pelvic organs
- early or delayed puberty in girls

Pelvic ultrasound is also used to guide procedures such as needle biopsies, in which needles are used to extract a sample of cells from organs for laboratory testing.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

For ultrasound procedures requiring insertion of the transducer, such as transvaginal or transrectal exams, the device is covered with a sheath and lubricated before insertion.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

The same principles apply to ultrasound procedures such as transrectal and transvaginal which require insertion of a special transducer into the body.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

### **Transabdominal:**

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

### **Transvaginal:**

Transvaginal ultrasound is performed very much like a gynecologic exam and involves the insertion of the transducer into the vagina after you empty your bladder. The tip of the transducer is smaller than the standard speculum used when performing a Pap test. A protective cover is placed over the transducer, lubricated with a small amount of gel, and then inserted into the vagina. Only two to three inches of the transducer end are inserted into the vagina. The images are obtained from different orientations to get the best views of the uterus and ovaries. Transvaginal ultrasound is usually performed with you lying on your back, possibly with your feet in stirrups similar to a gynecologic exam.

### **Transrectal:**

For a transrectal ultrasound, a protective cover is placed over the transducer. It is lubricated and then placed into the rectum.

Usually, you lie on your side, facing away from the examiner, with your knees and hips slightly flexed.

Doppler sonography is performed using the same transducer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

## What will I experience during and after the procedure?

**For a transabdominal exam:**

A clear water-based gel is applied to the abdomen. A transducer is moved back and forth over this area until the desired images are captured.

Ultrasound examinations are painless and easily tolerated by most patients.

**For a transvaginal exam:**

With transvaginal ultrasound, although the examination is often performed to look for a cause of pelvic pain, the sonogram itself should not be painful or significantly increase your discomfort. A vaginal sonogram is usually more comfortable than a manual gynecologic examination.

**For a transrectal exam:**

If no biopsy is required, transrectal ultrasound of the prostate is similar to or may have less discomfort than a rectal exam performed by your doctor.

If a biopsy is performed, additional discomfort (due to the needle insertion) is usually minimal because the rectal wall is relatively insensitive to the pain in the region of the prostate. A biopsy will add time to the procedure.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

These ultrasound examinations are usually completed within 30 minutes.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound is the preferred imaging modality for the diagnosis and monitoring of pregnant women and their unborn babies.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.
- Pelvic ultrasound can help to identify and evaluate a variety of urinary and reproductive system disorders in both sexes without x-ray exposure.

## Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Pelvic Ultrasound Imaging?

Ultrasound waves are disrupted by air or gas; therefore ultrasound is not an ideal imaging technique for air-filled bowel or organs obscured by the bowel. In most cases, barium exams, CT scanning, and MRI are the methods of choice in such a setting.

Large patients are more difficult to image by ultrasound because greater amounts of tissue attenuate (weaken) the sound waves as they pass deeper into the body and need to be returned to the transducer for analysis.

## Additional Information and Resources

### RTAnswers.org

Radiation Therapy for Gynecologic Cancers

Radiation Therapy for Prostate Cancer

## Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information

for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## **Ultrasound - Carotid**

Carotid ultrasound uses sound waves to produce pictures of the carotid arteries in the neck which carry blood from the heart to the brain. A Doppler ultrasound study – a technique that evaluates blood flow through a blood vessel – is usually part of this exam. It's most frequently used to screen patients for blockage or narrowing of the carotid arteries, a condition called stenosis which may increase the risk of stroke.

Little or no special preparation is required for this procedure. Leave jewelry at home and wear loose, comfortable clothing. A loose-fitting, open necked shirt or blouse is ideal.

### **What is Carotid Ultrasound Imaging?**

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

An ultrasound of the body's two carotid arteries, which are located on each side of the neck and carry blood from the heart to the brain, provides detailed pictures of these blood vessels and information about the blood flowing through them.

A Doppler ultrasound study is usually an integral part of a carotid ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

### **What are some common uses of the procedure?**

The carotid ultrasound is most frequently performed to detect narrowing, or stenosis, of the carotid artery, a condition that substantially increases the risk of stroke.

The major goal of carotid ultrasound is to screen patients for blockage or narrowing of their carotid arteries, which if present may increase their risk of having a stroke. If a significant narrowing is detected, a comprehensive treatment may be initiated.

It may also be performed if a patient has high blood pressure or a carotid bruit (pronounced *brU-E*)—an abnormal sound in the neck that is heard with the stethoscope. In some cases, it is also performed in preparation for coronary artery bypass surgery. Other risk factors calling for a carotid ultrasound are:

- diabetes
- elevated blood cholesterol
- a family history of stroke or heart disease

A carotid ultrasound is also performed to:

- locate a hematoma, a collection of clotted blood that may slow and eventually stop blood flow.
- check the state of the carotid artery after surgery to restore normal blood flow.
- verify the position of a metal stent placed to maintain carotid blood flow.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

In children, Doppler ultrasound is used to:

- evaluate blood flow.
- predict a higher risk of stroke in children with sickle cell disease.
- detect abnormalities in the blood vessels, lymph nodes and lymphatic vessels.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

A loose-fitting, open necked shirt or blouse is ideal.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

No other preparation is required.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

A clear water-based gel is applied to the area of the body being studied to help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The sonographer (ultrasound technologist) or radiologist then places the transducer on the skin in various locations, sweeping over the area of interest or angling the sound beam from a different location to better see an area of concern.

Doppler sonography is performed using the same transducer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

The branches of the carotid arteries inside the head cannot be seen directly but can be evaluated with Doppler ultrasound in children with sickle cell disease. It is performed by placing the transducer over the child's temple and recording the blood flow in the center of the skull.

This ultrasound examination is usually completed within 30 to 45 minutes.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

After you are positioned on the examination table, the radiologist or sonographer will apply some warm water-based gel on your skin and then place the transducer firmly against your body, moving it back and forth over the area of interest until the desired images are captured. There is usually no discomfort from pressure as the transducer is pressed against the area being examined.

If scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

It may be necessary to tilt or rotate your head for the best exposure, as the transducer is swept over the entire length of your neck on both sides to obtain views of the artery from different perspectives. It also helps to keep your arm and shoulder down. Your head will be supported to keep it still.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- If a carotid ultrasound exam shows narrowing of one or both carotid arteries, treatment can be taken to restore the free flow of blood to the brain. Many strokes are prevented as a result.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.
- In nearly 50 years of experience, carotid ultrasound has proved to be a risk-free procedure.

## What are the limitations of Carotid Ultrasound Imaging?

- Carotid ultrasound may be difficult or impossible if a patient has a dressing covering a wound or surgical scar in the neck.
- An occasional patient is difficult to examine because of the size or contour of the neck.
- Calcium deposits in the wall of the carotid artery may make it difficult to evaluate the vessel.
- A small amount of soft plaque that produces low-level echoes may go undetected.
- Ultrasound cannot visualize the entire length of the vessel because the last portion of the carotid artery travels through the bone at the base of the skull. For a more complete assessment, patients may need to undergo a CT or MRI of the carotid arteries.

## Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Scrotum

Ultrasound imaging of the scrotum uses sound waves to produce pictures of a man's testicles and surrounding tissues. It is the primary method used to help evaluate disorders of the testicles, epididymis (a tube immediately next to a testicle that collects sperm) and scrotum. Ultrasound is safe, noninvasive, and does not use ionizing radiation.

This procedure requires little to no special preparation. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



## What is Ultrasound Imaging of the Scrotum?

Ultrasound imaging of the scrotum provides pictures of a male's testicles and the surrounding tissues.

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

## What are some common uses of the procedure?

Ultrasound imaging of the scrotum is the primary imaging method used to evaluate disorders of the testicles, epididymis (a tube immediately next to a testis that collects sperm made by the testicle) and

scrotum.

This study is typically used to:

- determine whether a mass in the scrotum felt by the patient or doctor is cystic or solid and its location.
- diagnose results of trauma to the scrotal area.
- diagnose causes of testicular pain or swelling such as inflammation or torsion.
- evaluate the cause of infertility such as varicocele.
- look for the location of undescended testis.

A sudden onset of pain in the scrotum should be taken very seriously. The most common cause of scrotal pain is epididymitis, an inflammation of the epididymis. It is treatable with antibiotics. If left untreated, this condition can lead to an abscess or loss of blood flow to the testicles.

Ultrasound can often detect an absent or undescended testicle as well. It is estimated that approximately three percent of full-term baby boys have an undescended testicle. The testicle normally migrates from the abdomen down a short passage called the inguinal canal and then into the usual position in the scrotal sac before birth. If not present in the scrotal sac, the testicle may have stopped in the inguinal region, in which case the ultrasound examination will often see it. If the testicle has not left the abdominal cavity, it may not be seen by sonography. If a testicle is not detected, a urologist may be consulted in order to decide whether additional imaging such as an MRI is needed to determine its location. If the testicle is found to be in the inguinal region, it may be moved into the scrotum. If left in the abdomen too long, the testicle may become cancerous and may need to be removed.

Ultrasound can identify testicular torsion, the twisting of the spermatic cord that contains the vessels that supply blood to the testicle. Testicular torsion is caused by abnormally loose attachments of tissues that are formed during fetal development. Torsion commonly appears during adolescence, and less often in the neonatal period, and is very painful. Torsion requires immediate surgery to avoid permanent damage to the testicle.

Ultrasound also can be used to locate and evaluate masses (lumps or tumors) in the testicle or elsewhere in the scrotum. Collections of fluid and abnormalities of the blood vessels may appear as masses and can be assessed by ultrasound. Masses both outside and within the testicles may be benign or malignant and should be evaluated as soon as they are detected.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

No other preparation is required.

If your son is undergoing the examination, explain the procedure to him. In most cases, you will be able to accompany him into the examination room for support and reassurance.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

In order to perform a scrotal sonogram, most commonly a linear small parts transducer is used.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

Ultrasound imaging of the scrotum is usually completed within 15 to 30 minutes, though sometimes more time is necessary.

If you are accompanying your son during the procedure, ask him to lie still so the sound waves can produce the proper images.

Babies undergoing the examination might cry, but this should not interfere with the procedure.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Scrotal Ultrasound Imaging?

Ultrasound of the scrotum is helpful for finding abnormalities such as masses in the scrotum or testicles. However, it does not always permit an exact diagnosis (i.e., the exact type of tissue a mass is composed of, especially when the mass is solid). Blood flow images of the testicles are not always reliable in determining the presence or absence of blood supply to a testicle that has twisted. When searching for an absent testicle, ultrasound may not be able to find it if it is located in the abdomen because gas filled bowel loops may block the view.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

### Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

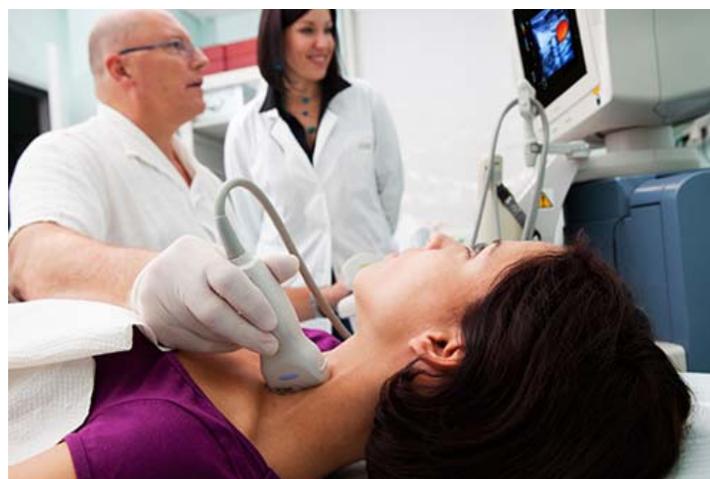
Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Thyroid

Thyroid ultrasound uses sound waves to produce pictures of the thyroid gland within the neck. It does not use ionizing radiation and is commonly used to evaluate lumps or nodules found during a routine physical or other imaging exam.

This procedure requires little to no special preparation. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



## What is an Ultrasound of the Thyroid?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

An ultrasound of the thyroid produces pictures of the thyroid gland and the adjacent structures in the neck. The thyroid gland is located in front of the neck just above the collar bones and is shaped like a butterfly, with one lobe on either side of the neck connected by a narrow band of tissue. It is one of nine endocrine glands located throughout the body that make and send hormones into the bloodstream.

The thyroid gland makes the thyroid hormone, which helps to regulate a variety of body functions including how fast the heart beats. It is very common for patchy areas or nodules to develop in the thyroid that may or may not be felt on the skin surface. About five to 10 percent of adults will have lumps in their thyroid that a doctor can identify on an exam. These are called palpable nodules. Ultrasound is very

sensitive and shows many nodules that cannot be felt. In some age groups, nodules are seen on ultrasound in as many as 70 percent of adults. The vast majority of these are benign regions of thyroid tissue that pose no health risk. The minority of these are true tumors of the thyroid and may require further diagnosis or treatment.

## What are some common uses of the procedure?

An ultrasound of the thyroid is typically used:

- to determine if a lump in the neck is arising from the thyroid or an adjacent structure
- to analyze the appearance of thyroid nodules and determine if they are the more common benign nodule or if the nodule has features that require a biopsy. If biopsy is required, ultrasound-guided fine needle aspiration can help improve accuracy of the biopsy.
- to look for additional nodules in patients with one or more nodules felt on physical exam
- to see if a thyroid nodule has substantially grown over time

Because ultrasound provides real-time images, images that are renewed continuously, it also can be used to guide procedures such as needle biopsies, in which needles are used to extract sample cells from an abnormal area for laboratory testing. Ultrasound may also be used to guide the insertion of a catheter or other drainage device and helps assure safe and accurate placement and fluid drainage for diagnosis and/or relief of patient discomfort.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

No other preparation is required.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves

(that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

A pillow may be placed behind the shoulders to extend the area to be scanned for a thyroid ultrasound exam. This is especially important for a small child with very little space between the chin and the chest.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

An ultrasound of the thyroid is usually completed within 30 minutes.

During the exam, you may need to extend your neck to help the sonographer (technologist) examine your thyroid with ultrasound. If you suffer from neck pain, inform the technologist so that they can help situate you in a comfortable position for the exam.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.

- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.

## Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of an Ultrasound of the Thyroid?

If one or more nodules are detected within the thyroid gland, the radiologist will examine the features of the nodules. Some features are strongly suggestive that a nodule is benign nature, and some raise concern that the nodule may be a true tumor. In other cases, the radiologist cannot distinguish between benign and malignant lumps with complete certainty. A fine needle biopsy and review of tissue under a microscope may be recommended for further evaluation, but in some cases surveillance and a repeat sonogram after a few months looking for stability may suffice.

It is not possible to determine thyroid function—that is, whether the thyroid gland is underactive, overactive, or normal—with ultrasound. For that determination, your doctor may order a blood test or a radioactive iodine uptake test.

## Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.



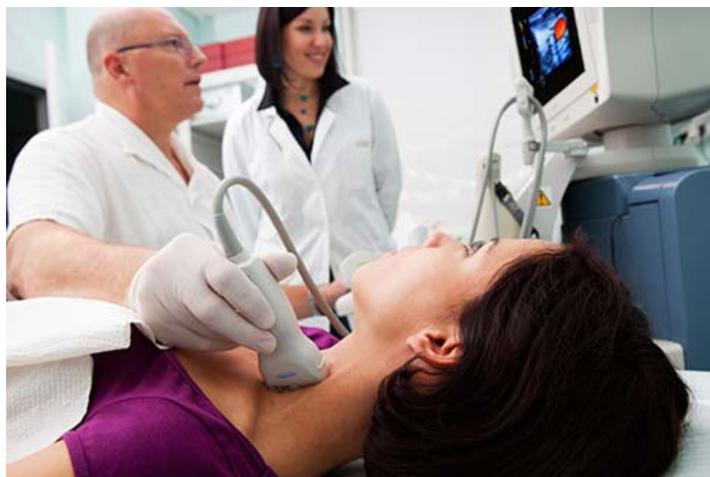


## Ultrasound - Vascular

Vascular ultrasound uses sound waves to evaluate the body's circulatory system and help identify blockages in the arteries and veins and detect blood clots. A Doppler ultrasound study – a technique that evaluates blood flow through a blood vessel – is usually part of this exam. Ultrasound does not use ionizing radiation, has no known harmful effects, and provides images of soft tissues that don't show up on x-ray images.

Little or no special preparation is required for this procedure. However, you may occasionally be asked to fast beforehand.

Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



## What is Vascular Ultrasound?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

Vascular ultrasound provides pictures of the body's veins and arteries.

A Doppler ultrasound study is usually part of a vascular ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

Sonography is a useful way of evaluating the body's circulatory system. Vascular ultrasound is performed to:

- help monitor the blood flow to organs and tissues throughout the body.
- locate and identify blockages (stenosis) and abnormalities like plaque or emboli and help plan for their effective treatment.
- detect blood clots (deep venous thrombosis (DVT) in the major veins of the legs or arms.
- determine whether a patient is a good candidate for a procedure such as angioplasty.
- evaluate the success of procedures that graft or bypass blood vessels.
- determine if there is an enlarged artery (aneurysm).
- evaluate varicose veins.

In children, ultrasound is used to:

- aid in the placement of a needle or catheter into a vein or artery to help avoid complications such as bleeding, nerve injury or pseudo-aneurysm (abnormal outpouching of an artery with the risk of rupture).
- evaluate a connection between an artery and a vein which can be seen in congenital vascular malformations (arteriovenous malformations or fistula) and in dialysis fistula.

If a line is placed in an artery or vein of the legs or arms, there is a much higher chance of developing a clot around it due to the smaller vessel size (especially in infants and young children). In some instances, a clot can form in the arm or in the left leg with the latter extending into the major vein of the abdomen. Plaque formation is not frequently seen in children but there can be compression at the inlet of the chest.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

If your abdominal vessels are being examined, unless the examination is performed on an urgent basis, it is best to fast before the procedure.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound

waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

A clear water-based gel is applied to the area of the body being studied to help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The sonographer (ultrasound technologist) or radiologist then places the transducer on the skin in various locations, sweeping over the area of interest or angling the sound beam from a different location to better see an area of concern.

Doppler sonography is performed using the same transducer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

This ultrasound examination is usually completed within 30 to 45 minutes. Occasionally, complex examinations may take longer.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

After you are positioned on the examination table, the radiologist or sonographer will apply some warm water-based gel on your skin and then place the transducer firmly against your body, moving it back and forth over the area of interest until the desired images are captured. There is usually no discomfort from pressure as the transducer is pressed against the area being examined.

If scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Vascular Ultrasound?

- Vessels deep in the body are harder to see than superficial vessels. Specialized equipment or other tests such as CT or MRI may be necessary to properly visualize them.
- Smaller vessels are more difficult to image and evaluate than larger vessels.
- Calcifications that occur as a result of atherosclerosis may obstruct the ultrasound beam.
- The test is specialized and is best performed by a technologist and physician with experience in vascular ultrasound imaging.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in

several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Venous (Extremities)

Venous ultrasound uses sound waves to produce images of the veins in the body. It is commonly used to search for blood clots, especially in the veins of the leg – a condition often referred to as deep vein thrombosis. Ultrasound does not use ionizing radiation and has no known harmful effects.

On occasion, you may be asked not to eat or drink anything but water for six to eight hours beforehand. Otherwise, little or no special preparation is required for this procedure. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



## What is Venous Ultrasound Imaging?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

Venous ultrasound provides pictures of the veins throughout the body.

A Doppler ultrasound study may be part of a venous ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

The most common reason for a venous ultrasound exam is to search for blood clots, especially in the veins of the leg. This condition is often referred to as deep vein thrombosis or DVT. These clots may break off and pass into the lungs, where they can cause a dangerous condition called pulmonary embolism. If the blood clot in the leg is found early enough, treatment can be started to prevent it from passing to the lung.

A venous ultrasound study is also performed to:

- determine the cause of long-standing leg swelling. In people with a common condition called “varicose veins”, the valves that normally keep blood flowing back to the heart may be damaged, and venous ultrasound can help identify the damaged valves and abnormal blood flow.
- aid in guiding placement of a needle or catheter into a vein. Sonography can help locate the exact site of the vein and avoid complications, such as bleeding or damage to a nearby nerve or artery.
- map out the veins in the leg or arm so that pieces of vein may be removed and used to bypass a narrowed or blocked blood vessel. An example is using portions of vein from the leg to surgically bypass narrowed heart (coronary) arteries.
- examine a blood vessel graft used for dialysis if it is not working as expected; for example, the graft may be narrowed or blocked.

In children, venous ultrasound is used to:

- evaluate a connection between an artery and a vein which can be seen in congenital vascular malformations (arteriovenous malformations or fistula) and in dialysis fistula.

If a line is placed in a vein of the legs or arms, there is a much higher chance of developing a clot around it due to the smaller vessel size (especially in infants and young children). In some instances, a clot can suddenly form in the arm due to compression of the vein at the inlet of the chest or in the left leg due to compression of the vein on the left side by an artery in the abdomen.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

A period of fasting is necessary only if you are to have an examination of veins in your abdomen. In this case, you will probably be asked not to ingest any food or fluids except water for six to eight hours ahead of time. Otherwise, there is no other special preparation for a venous ultrasound.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound

waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

A clear water-based gel is applied to the area of the body being studied to help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The sonographer (ultrasound technologist) or radiologist then places the transducer on the skin in various locations, sweeping over the area of interest or angling the sound beam from a different location to better see an area of concern.

Doppler sonography is performed using the same transducer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

This ultrasound examination is usually completed within 30 to 45 minutes. More complex exams may take a longer period of time.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

After you are positioned on the examination table, the radiologist or sonographer will apply some warm water-based gel on your skin and then place the transducer firmly against your body, moving it back and forth over the area of interest until the desired images are captured. There is usually no discomfort from pressure as the transducer is pressed against the area being examined.

If scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Venous ultrasound helps to detect blood clots in the veins of the legs before they become dislodged and pass to the lungs. It can also show the movement of blood within blood vessels.
- Compared to venography, which requires injecting contrast material into a vein, venous ultrasound is accurate for detecting blood clots in the veins of the thigh down to the knee. In the calf, because the veins become very small, ultrasound is less accurate. However, potentially dangerous venous clots are typically lodged in the larger veins.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Venous Ultrasound Imaging?

Veins lying deep beneath the skin, especially small veins in the calf, may be hard to see.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in

several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Carotid

Carotid ultrasound uses sound waves to produce pictures of the carotid arteries in the neck which carry blood from the heart to the brain. A Doppler ultrasound study – a technique that evaluates blood flow through a blood vessel – is usually part of this exam. It's most frequently used to screen patients for blockage or narrowing of the carotid arteries, a condition called stenosis which may increase the risk of stroke.

Little or no special preparation is required for this procedure. Leave jewelry at home and wear loose, comfortable clothing. A loose-fitting, open necked shirt or blouse is ideal.

## What is Carotid Ultrasound Imaging?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

An ultrasound of the body's two carotid arteries, which are located on each side of the neck and carry blood from the heart to the brain, provides detailed pictures of these blood vessels and information about the blood flowing through them.

A Doppler ultrasound study is usually an integral part of a carotid ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

The carotid ultrasound is most frequently performed to detect narrowing, or stenosis, of the carotid artery, a condition that substantially increases the risk of stroke.

The major goal of carotid ultrasound is to screen patients for blockage or narrowing of their carotid arteries, which if present may increase their risk of having a stroke. If a significant narrowing is detected, a comprehensive treatment may be initiated.

It may also be performed if a patient has high blood pressure or a carotid bruit (pronounced *brU-E*)—an abnormal sound in the neck that is heard with the stethoscope. In some cases, it is also performed in preparation for coronary artery bypass surgery. Other risk factors calling for a carotid ultrasound are:

- diabetes
- elevated blood cholesterol
- a family history of stroke or heart disease

A carotid ultrasound is also performed to:

- locate a hematoma, a collection of clotted blood that may slow and eventually stop blood flow.
- check the state of the carotid artery after surgery to restore normal blood flow.
- verify the position of a metal stent placed to maintain carotid blood flow.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

In children, Doppler ultrasound is used to:

- evaluate blood flow.
- predict a higher risk of stroke in children with sickle cell disease.
- detect abnormalities in the blood vessels, lymph nodes and lymphatic vessels.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

A loose-fitting, open necked shirt or blouse is ideal.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

No other preparation is required.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

A clear water-based gel is applied to the area of the body being studied to help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The sonographer (ultrasound technologist) or radiologist then places the transducer on the skin in various locations, sweeping over the area of interest or angling the sound beam from a different location to better see an area of concern.

Doppler sonography is performed using the same transducer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

The branches of the carotid arteries inside the head cannot be seen directly but can be evaluated with Doppler ultrasound in children with sickle cell disease. It is performed by placing the transducer over the child's temple and recording the blood flow in the center of the skull.

This ultrasound examination is usually completed within 30 to 45 minutes.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

After you are positioned on the examination table, the radiologist or sonographer will apply some warm water-based gel on your skin and then place the transducer firmly against your body, moving it back and forth over the area of interest until the desired images are captured. There is usually no discomfort from pressure as the transducer is pressed against the area being examined.

If scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

It may be necessary to tilt or rotate your head for the best exposure, as the transducer is swept over the entire length of your neck on both sides to obtain views of the artery from different perspectives. It also helps to keep your arm and shoulder down. Your head will be supported to keep it still.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- If a carotid ultrasound exam shows narrowing of one or both carotid arteries, treatment can be taken to restore the free flow of blood to the brain. Many strokes are prevented as a result.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.
- In nearly 50 years of experience, carotid ultrasound has proved to be a risk-free procedure.

## What are the limitations of Carotid Ultrasound Imaging?

- Carotid ultrasound may be difficult or impossible if a patient has a dressing covering a wound or surgical scar in the neck.
- An occasional patient is difficult to examine because of the size or contour of the neck.
- Calcium deposits in the wall of the carotid artery may make it difficult to evaluate the vessel.
- A small amount of soft plaque that produces low-level echoes may go undetected.
- Ultrasound cannot visualize the entire length of the vessel because the last portion of the carotid artery travels through the bone at the base of the skull. For a more complete assessment, patients may need to undergo a CT or MRI of the carotid arteries.

## Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Scrotum

Ultrasound imaging of the scrotum uses sound waves to produce pictures of a man's testicles and surrounding tissues. It is the primary method used to help evaluate disorders of the testicles, epididymis (a tube immediately next to a testicle that collects sperm) and scrotum. Ultrasound is safe, noninvasive, and does not use ionizing radiation.

This procedure requires little to no special preparation. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



## What is Ultrasound Imaging of the Scrotum?

Ultrasound imaging of the scrotum provides pictures of a male's testicles and the surrounding tissues.

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

## What are some common uses of the procedure?

Ultrasound imaging of the scrotum is the primary imaging method used to evaluate disorders of the testicles, epididymis (a tube immediately next to a testis that collects sperm made by the testicle) and

scrotum.

This study is typically used to:

- determine whether a mass in the scrotum felt by the patient or doctor is cystic or solid and its location.
- diagnose results of trauma to the scrotal area.
- diagnose causes of testicular pain or swelling such as inflammation or torsion.
- evaluate the cause of infertility such as varicocele.
- look for the location of undescended testis.

A sudden onset of pain in the scrotum should be taken very seriously. The most common cause of scrotal pain is epididymitis, an inflammation of the epididymis. It is treatable with antibiotics. If left untreated, this condition can lead to an abscess or loss of blood flow to the testicles.

Ultrasound can often detect an absent or undescended testicle as well. It is estimated that approximately three percent of full-term baby boys have an undescended testicle. The testicle normally migrates from the abdomen down a short passage called the inguinal canal and then into the usual position in the scrotal sac before birth. If not present in the scrotal sac, the testicle may have stopped in the inguinal region, in which case the ultrasound examination will often see it. If the testicle has not left the abdominal cavity, it may not be seen by sonography. If a testicle is not detected, a urologist may be consulted in order to decide whether additional imaging such as an MRI is needed to determine its location. If the testicle is found to be in the inguinal region, it may be moved into the scrotum. If left in the abdomen too long, the testicle may become cancerous and may need to be removed.

Ultrasound can identify testicular torsion, the twisting of the spermatic cord that contains the vessels that supply blood to the testicle. Testicular torsion is caused by abnormally loose attachments of tissues that are formed during fetal development. Torsion commonly appears during adolescence, and less often in the neonatal period, and is very painful. Torsion requires immediate surgery to avoid permanent damage to the testicle.

Ultrasound also can be used to locate and evaluate masses (lumps or tumors) in the testicle or elsewhere in the scrotum. Collections of fluid and abnormalities of the blood vessels may appear as masses and can be assessed by ultrasound. Masses both outside and within the testicles may be benign or malignant and should be evaluated as soon as they are detected.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

No other preparation is required.

If your son is undergoing the examination, explain the procedure to him. In most cases, you will be able to accompany him into the examination room for support and reassurance.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

In order to perform a scrotal sonogram, most commonly a linear small parts transducer is used.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

Ultrasound imaging of the scrotum is usually completed within 15 to 30 minutes, though sometimes more time is necessary.

If you are accompanying your son during the procedure, ask him to lie still so the sound waves can produce the proper images.

Babies undergoing the examination might cry, but this should not interfere with the procedure.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Scrotal Ultrasound Imaging?

Ultrasound of the scrotum is helpful for finding abnormalities such as masses in the scrotum or testicles. However, it does not always permit an exact diagnosis (i.e., the exact type of tissue a mass is composed of, especially when the mass is solid). Blood flow images of the testicles are not always reliable in determining the presence or absence of blood supply to a testicle that has twisted. When searching for an absent testicle, ultrasound may not be able to find it if it is located in the abdomen because gas filled bowel loops may block the view.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

### Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

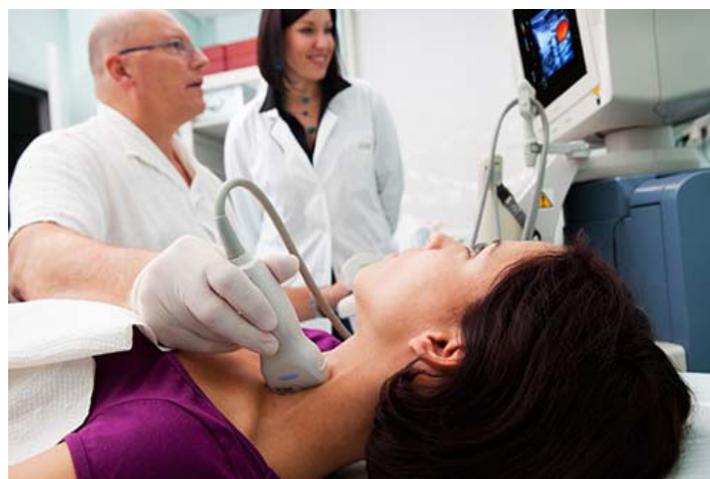
Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Thyroid

Thyroid ultrasound uses sound waves to produce pictures of the thyroid gland within the neck. It does not use ionizing radiation and is commonly used to evaluate lumps or nodules found during a routine physical or other imaging exam.

This procedure requires little to no special preparation. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



## What is an Ultrasound of the Thyroid?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

An ultrasound of the thyroid produces pictures of the thyroid gland and the adjacent structures in the neck. The thyroid gland is located in front of the neck just above the collar bones and is shaped like a butterfly, with one lobe on either side of the neck connected by a narrow band of tissue. It is one of nine endocrine glands located throughout the body that make and send hormones into the bloodstream.

The thyroid gland makes the thyroid hormone, which helps to regulate a variety of body functions including how fast the heart beats. It is very common for patchy areas or nodules to develop in the thyroid that may or may not be felt on the skin surface. About five to 10 percent of adults will have lumps in their thyroid that a doctor can identify on an exam. These are called palpable nodules. Ultrasound is very

sensitive and shows many nodules that cannot be felt. In some age groups, nodules are seen on ultrasound in as many as 70 percent of adults. The vast majority of these are benign regions of thyroid tissue that pose no health risk. The minority of these are true tumors of the thyroid and may require further diagnosis or treatment.

## What are some common uses of the procedure?

An ultrasound of the thyroid is typically used:

- to determine if a lump in the neck is arising from the thyroid or an adjacent structure
- to analyze the appearance of thyroid nodules and determine if they are the more common benign nodule or if the nodule has features that require a biopsy. If biopsy is required, ultrasound-guided fine needle aspiration can help improve accuracy of the biopsy.
- to look for additional nodules in patients with one or more nodules felt on physical exam
- to see if a thyroid nodule has substantially grown over time

Because ultrasound provides real-time images, images that are renewed continuously, it also can be used to guide procedures such as needle biopsies, in which needles are used to extract sample cells from an abnormal area for laboratory testing. Ultrasound may also be used to guide the insertion of a catheter or other drainage device and helps assure safe and accurate placement and fluid drainage for diagnosis and/or relief of patient discomfort.

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

No other preparation is required.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves

(that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

A pillow may be placed behind the shoulders to extend the area to be scanned for a thyroid ultrasound exam. This is especially important for a small child with very little space between the chin and the chest.

After you are positioned on the examination table, the radiologist (a physician specifically trained to supervise and interpret radiology examinations) or sonographer will apply a warm water-based gel to the area of the body being studied. The gel will help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The transducer is placed on the body and moved back and forth over the area of interest until the desired images are captured.

There is usually no discomfort from pressure as the transducer is pressed against the area being examined. However, if scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

An ultrasound of the thyroid is usually completed within 30 minutes.

During the exam, you may need to extend your neck to help the sonographer (technologist) examine your thyroid with ultrasound. If you suffer from neck pain, inform the technologist so that they can help situate you in a comfortable position for the exam.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.

- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and fluid aspiration.

## Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of an Ultrasound of the Thyroid?

If one or more nodules are detected within the thyroid gland, the radiologist will examine the features of the nodules. Some features are strongly suggestive that a nodule is benign in nature, and some raise concern that the nodule may be a true tumor. In other cases, the radiologist cannot distinguish between benign and malignant lumps with complete certainty. A fine needle biopsy and review of tissue under a microscope may be recommended for further evaluation, but in some cases surveillance and a repeat sonogram after a few months looking for stability may suffice.

It is not possible to determine thyroid function—that is, whether the thyroid gland is underactive, overactive, or normal—with ultrasound. For that determination, your doctor may order a blood test or a radioactive iodine uptake test.

## Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.



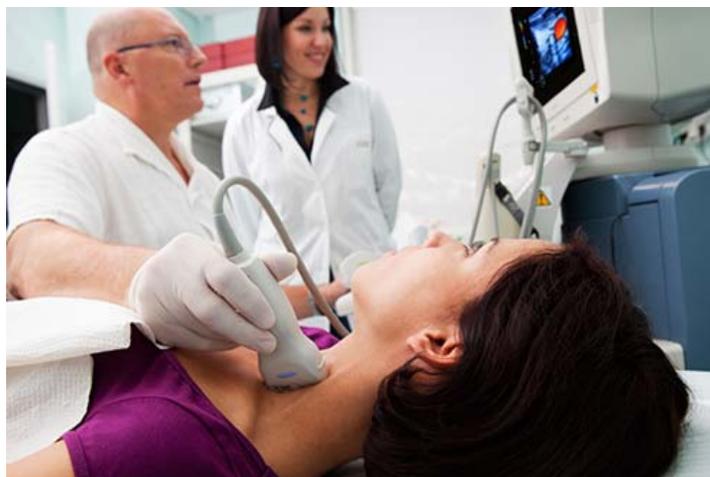


## Ultrasound - Vascular

Vascular ultrasound uses sound waves to evaluate the body's circulatory system and help identify blockages in the arteries and veins and detect blood clots. A Doppler ultrasound study – a technique that evaluates blood flow through a blood vessel – is usually part of this exam. Ultrasound does not use ionizing radiation, has no known harmful effects, and provides images of soft tissues that don't show up on x-ray images.

Little or no special preparation is required for this procedure. However, you may occasionally be asked to fast beforehand.

Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



## What is Vascular Ultrasound?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

Vascular ultrasound provides pictures of the body's veins and arteries.

A Doppler ultrasound study is usually part of a vascular ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

Sonography is a useful way of evaluating the body's circulatory system. Vascular ultrasound is performed to:

- help monitor the blood flow to organs and tissues throughout the body.
- locate and identify blockages (stenosis) and abnormalities like plaque or emboli and help plan for their effective treatment.
- detect blood clots (deep venous thrombosis (DVT) in the major veins of the legs or arms.
- determine whether a patient is a good candidate for a procedure such as angioplasty.
- evaluate the success of procedures that graft or bypass blood vessels.
- determine if there is an enlarged artery (aneurysm).
- evaluate varicose veins.

In children, ultrasound is used to:

- aid in the placement of a needle or catheter into a vein or artery to help avoid complications such as bleeding, nerve injury or pseudo-aneurysm (abnormal outpouching of an artery with the risk of rupture).
- evaluate a connection between an artery and a vein which can be seen in congenital vascular malformations (arteriovenous malformations or fistula) and in dialysis fistula.

If a line is placed in an artery or vein of the legs or arms, there is a much higher chance of developing a clot around it due to the smaller vessel size (especially in infants and young children). In some instances, a clot can form in the arm or in the left leg with the latter extending into the major vein of the abdomen. Plaque formation is not frequently seen in children but there can be compression at the inlet of the chest.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

If your abdominal vessels are being examined, unless the examination is performed on an urgent basis, it is best to fast before the procedure.

Ultrasound examinations are very sensitive to motion, and an active or crying child can prolong the examination process. To ensure a smooth experience, it often helps to explain the procedure to the child prior to the exam. Bringing books, small toys, music or games can help to distract the child and make the time pass quickly. The ultrasound exam room may have a television. Feel free to ask for your child's favorite channel.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound

waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

A clear water-based gel is applied to the area of the body being studied to help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The sonographer (ultrasound technologist) or radiologist then places the transducer on the skin in various locations, sweeping over the area of interest or angling the sound beam from a different location to better see an area of concern.

Doppler sonography is performed using the same transducer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

This ultrasound examination is usually completed within 30 to 45 minutes. Occasionally, complex examinations may take longer.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

After you are positioned on the examination table, the radiologist or sonographer will apply some warm water-based gel on your skin and then place the transducer firmly against your body, moving it back and forth over the area of interest until the desired images are captured. There is usually no discomfort from pressure as the transducer is pressed against the area being examined.

If scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Vascular Ultrasound?

- Vessels deep in the body are harder to see than superficial vessels. Specialized equipment or other tests such as CT or MRI may be necessary to properly visualize them.
- Smaller vessels are more difficult to image and evaluate than larger vessels.
- Calcifications that occur as a result of atherosclerosis may obstruct the ultrasound beam.
- The test is specialized and is best performed by a technologist and physician with experience in vascular ultrasound imaging.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in

several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.



## Ultrasound - Venous (Extremities)

Venous ultrasound uses sound waves to produce images of the veins in the body. It is commonly used to search for blood clots, especially in the veins of the leg – a condition often referred to as deep vein thrombosis. Ultrasound does not use ionizing radiation and has no known harmful effects.

On occasion, you may be asked not to eat or drink anything but water for six to eight hours beforehand. Otherwise, little or no special preparation is required for this procedure. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown.



## What is Venous Ultrasound Imaging?

Ultrasound is safe and painless, and produces pictures of the inside of the body using sound waves. Ultrasound imaging, also called ultrasound scanning or sonography, involves the use of a small transducer (probe) and ultrasound gel placed directly on the skin. High-frequency sound waves are transmitted from the probe through the gel into the body. The transducer collects the sounds that bounce back and a computer then uses those sound waves to create an image. Ultrasound examinations do not use ionizing radiation (as used in x-rays), thus there is no radiation exposure to the patient. Because ultrasound images are captured in real-time, they can show the structure and movement of the body's internal organs, as well as blood flowing through blood vessels.

Ultrasound imaging is a noninvasive medical test that helps physicians diagnose and treat medical conditions.

Venous ultrasound provides pictures of the veins throughout the body.

A Doppler ultrasound study may be part of a venous ultrasound examination.

Doppler ultrasound, also called color Doppler ultrasonography, is a special ultrasound technique that allows the physician to see and evaluate blood flow through arteries and veins in the abdomen, arms, legs, neck and/or brain (in infants and children) or within various body organs such as the liver or kidneys.

## What are some common uses of the procedure?

The most common reason for a venous ultrasound exam is to search for blood clots, especially in the veins of the leg. This condition is often referred to as deep vein thrombosis or DVT. These clots may break off and pass into the lungs, where they can cause a dangerous condition called pulmonary embolism. If the blood clot in the leg is found early enough, treatment can be started to prevent it from passing to the lung.

A venous ultrasound study is also performed to:

- determine the cause of long-standing leg swelling. In people with a common condition called “varicose veins”, the valves that normally keep blood flowing back to the heart may be damaged, and venous ultrasound can help identify the damaged valves and abnormal blood flow.
- aid in guiding placement of a needle or catheter into a vein. Sonography can help locate the exact site of the vein and avoid complications, such as bleeding or damage to a nearby nerve or artery.
- map out the veins in the leg or arm so that pieces of vein may be removed and used to bypass a narrowed or blocked blood vessel. An example is using portions of vein from the leg to surgically bypass narrowed heart (coronary) arteries.
- examine a blood vessel graft used for dialysis if it is not working as expected; for example, the graft may be narrowed or blocked.

In children, venous ultrasound is used to:

- evaluate a connection between an artery and a vein which can be seen in congenital vascular malformations (arteriovenous malformations or fistula) and in dialysis fistula.

If a line is placed in a vein of the legs or arms, there is a much higher chance of developing a clot around it due to the smaller vessel size (especially in infants and young children). In some instances, a clot can suddenly form in the arm due to compression of the vein at the inlet of the chest or in the left leg due to compression of the vein on the left side by an artery in the abdomen.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels
- tumors and congenital vascular malformations
- reduced or absent blood flow to various organs
- greater than normal blood flow to different areas, which is sometimes seen in infections

## How should I prepare?

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You may need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

A period of fasting is necessary only if you are to have an examination of veins in your abdomen. In this case, you will probably be asked not to ingest any food or fluids except water for six to eight hours ahead of time. Otherwise, there is no other special preparation for a venous ultrasound.

## What does the equipment look like?

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to do the scanning. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. Some exams may use different transducers (with different capabilities) during a single exam. The transducer sends out high-frequency sound waves (that the human ear cannot hear) into the body and then listens for the returning echoes from the tissues in the body. The principles are similar to sonar used by boats and submarines.

The ultrasound image is immediately visible on a video display screen that looks like a computer or television monitor. The image is created based on the amplitude (loudness), frequency (pitch) and time it takes for the ultrasound signal to return from the area within the patient that is being examined to the transducer (the device placed on the patient's skin to send and receive the returning sound waves), as well as the type of body structure and composition of body tissue through which the sound travels. A small amount of gel is put on the skin to allow the sound waves to travel from the transducer to the examined area within the body and then back again. Ultrasound is an excellent modality for some areas of the body while other areas, especially air-filled lungs, are poorly suited for ultrasound.

## How does the procedure work?

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces back, or echoes. By measuring these echo waves, it is possible to determine how far away the object is as well as the object's size, shape and consistency (whether the object is solid or filled with fluid).

In medicine, ultrasound is used to detect changes in appearance, size or contour of organs, tissues, and vessels or to detect abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves into the body and receives the echoing waves. When the transducer is pressed against the skin, it directs small pulses of inaudible, high-frequency sound waves into the body. As the sound waves bounce off internal organs, fluids and tissues, the sensitive receiver in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. One or more frames of the moving pictures are typically captured as still images. Short video loops of the images may also be saved.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound

waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or color pictures that represent the flow of blood through the blood vessels.

## How is the procedure performed?

For most ultrasound exams, you will be positioned lying face-up on an examination table that can be tilted or moved. Patients may be turned to either side to improve the quality of the images.

A clear water-based gel is applied to the area of the body being studied to help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin that can block the sound waves from passing into your body. The sonographer (ultrasound technologist) or radiologist then places the transducer on the skin in various locations, sweeping over the area of interest or angling the sound beam from a different location to better see an area of concern.

Doppler sonography is performed using the same transducer.

When the examination is complete, you may be asked to dress and wait while the ultrasound images are reviewed.

This ultrasound examination is usually completed within 30 to 45 minutes. More complex exams may take a longer period of time.

## What will I experience during and after the procedure?

Ultrasound examinations are painless and easily tolerated by most patients.

After you are positioned on the examination table, the radiologist or sonographer will apply some warm water-based gel on your skin and then place the transducer firmly against your body, moving it back and forth over the area of interest until the desired images are captured. There is usually no discomfort from pressure as the transducer is pressed against the area being examined.

If scanning is performed over an area of tenderness, you may feel pressure or minor pain from the transducer.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Once the imaging is complete, the clear ultrasound gel will be wiped off your skin. Any portions that are not wiped off will dry quickly. The ultrasound gel does not usually stain or discolor clothing.

After an ultrasound examination, you should be able to resume your normal activities immediately.

## Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care physician, or to the physician or other healthcare provider who requested the exam. Usually, the referring physician or health care provider will share the results with you. In some cases, the radiologist may discuss results with you at the conclusion of your examination.

Follow-up examinations may be necessary. Your doctor will explain the exact reason why another exam is requested. Sometimes a follow-up exam is done because a potential abnormality needs further evaluation with additional views or a special imaging technique. A follow-up examination may also be necessary so that any change in a known abnormality can be monitored over time. Follow-up examinations are sometimes the best way to see if treatment is working or if a finding is stable or changed over time.

## What are the benefits vs. risks?

### Benefits

- Most ultrasound scanning is noninvasive (no needles or injections).
- Occasionally, an ultrasound exam may be temporarily uncomfortable, but it should not be painful.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging is extremely safe and does not use any ionizing radiation.
- Ultrasound scanning gives a clear picture of soft tissues that do not show up well on x-ray images.
- Venous ultrasound helps to detect blood clots in the veins of the legs before they become dislodged and pass to the lungs. It can also show the movement of blood within blood vessels.
- Compared to venography, which requires injecting contrast material into a vein, venous ultrasound is accurate for detecting blood clots in the veins of the thigh down to the knee. In the calf, because the veins become very small, ultrasound is less accurate. However, potentially dangerous venous clots are typically lodged in the larger veins.

### Risks

- For standard diagnostic ultrasound, there are no known harmful effects on humans.

## What are the limitations of Venous Ultrasound Imaging?

Veins lying deep beneath the skin, especially small veins in the calf, may be hard to see.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in

several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

## Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2018 Radiological Society of North America, Inc.