Case Study Submission Requirements: Urologic Ultrasound

- All cases must follow the General Requirements for the Submission of Case Studies.

- All cases must include a finalized corresponding report. For reporting criteria, refer to the Documentation Practice Parameter.

- For the purpose of accreditation, all anatomy must be appropriately labeled (for example – TRV RT KID SUPERIOR).

The following types of cases are not acceptable for submission:

- Doppler studies
- studies performed on automated bladder scanners
- studies in which a patient has had a nephrectomy or orchiectomy

From the main site:

- submit 4 diagnostic urologic case studies with their corresponding final reports in the areas most commonly performed by the practice

From each additional site or mobile unit:

- submit 1 diagnostic urologic case study with its corresponding final report
Urologic Ultrasound Imaging Checklists

- **All cases must include a finalized corresponding report.** For reporting criteria, refer to the [Documentation Practice Parameter](#).
- **For the purpose of accreditation, all anatomy must be appropriately labeled** (for example – TRV RT KID SUPERIOR).

### Scrotal

Labeled images of the following:

- ☐ 1. Comparison of echogenicity and size of testes
- ☐ 2. Scrotal skin thickness demonstrated (measure if abnormal)
- ☐ 3. Extratesticular masses demonstrated, if applicable
- ☐ 4. Extratesticular fluid collections demonstrated, if applicable

#### RIGHT HEMISCROTUM

- ☐ 5. Transverse superior view of RIGHT testis
- ☐ 6. Transverse midportion view of RIGHT testis (measure if abnormal)
- ☐ 7. Transverse inferior view of RIGHT testis
- ☐ 8. Longitudinal lateral view of RIGHT testis
- ☐ 9. Longitudinal midportion view of RIGHT testis (measure if abnormal)
- ☐ 10. Longitudinal medial view of RIGHT testis
- ☐ 11. RIGHT epididymis

#### LEFT HEMISCROTUM

- ☐ 12. Transverse superior view of LEFT testis
- ☐ 13. Transverse midportion view of LEFT testis (measure if abnormal)
- ☐ 14. Transverse inferior view of LEFT testis
- ☐ 15. Longitudinal lateral view of LEFT testis
- ☐ 16. Longitudinal midportion view of LEFT testis (measure if abnormal)
- ☐ 17. Longitudinal medial view of LEFT testis
- ☐ 18. LEFT epididymis

#### ABNORMALITIES

- ☐ 19. If abnormality seen, appropriate measurements obtained

#### TESTICULAR TORSION

- ☐ 20. If ruling out testicular torsion – flow in symptomatic side compared to asymptomatic side using color and/or spectral Doppler
# Urologic Ultrasound Imaging Checklists

## Limited Pelvic

### BLADDER
- ☐ 1. Mid-transverse view of the bladder (with AP and width measurements, if indicated)
- ☐ 2. Mid-sagittal view of the bladder (with length measurement, if indicated)
- ☐ 3. Measurement of bladder wall thickness (if indicated)
- ☐ 4. Calculated bladder volume or post void residual, if indicated
- ☐ 5. Appropriate views of abnormalities, if applicable

### PROSTATE
- ☐ 6. Longitudinal views of prostate
- ☐ 7. Coronal / axial views of prostate
- ☐ 8. Volume estimate based on measurements in 3 orthogonal planes
- ☐ 9. Appropriate views of abnormalities, if applicable

## Bladder

### Labeled images of the following:
- ☐ 1. Mid-transverse view of the bladder (with AP and width measurements, if indicated)
- ☐ 2. Mid-sagittal view of the bladder (with length measurement, if indicated)
- ☐ 3. Measurement of bladder wall thickness, if indicated
- ☐ 4. Calculated bladder volume or post void residual, if indicated
- ☐ 5. Appropriate views of bladder abnormalities, if applicable

## Prostate

### Labeled images of the following:
- ☐ 1. Longitudinal views of prostate
- ☐ 2. Coronal / axial views from apex to base of prostate
- ☐ 3. Volume estimate based on measurements in 3 orthogonal planes
- ☐ 4. Prostatic urethra, when possible
- ☐ 5. Periprostatic tissues
- ☐ 6. Size, shape, and symmetry of seminal vesicles
- ☐ 7. Vasa deferentia (if indicated)
- ☐ 8. Appropriate views of abnormalities, if applicable
## Urologic Ultrasound Imaging Checklists

### Renal

#### Labeled images of the following:

<table>
<thead>
<tr>
<th>Renal</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RIGHT KIDNEY</strong></td>
<td></td>
</tr>
<tr>
<td>☐ 1. Longitudinal views of RIGHT kidney (including length measurement)</td>
<td></td>
</tr>
<tr>
<td>☐ 2. Transverse views of upper pole, renal pelvis, and lower pole of RIGHT kidney</td>
<td></td>
</tr>
<tr>
<td>☐ 3. Liver / RIGHT kidney (if possible)</td>
<td></td>
</tr>
<tr>
<td><strong>LEFT KIDNEY</strong></td>
<td></td>
</tr>
<tr>
<td>☐ 4. Longitudinal views of LEFT kidney (including length measurement)</td>
<td></td>
</tr>
<tr>
<td>☐ 5. Transverse views of upper pole, renal pelvis, and lower pole of LEFT kidney</td>
<td></td>
</tr>
<tr>
<td>☐ 6. Spleen / LEFT kidney (if possible)</td>
<td></td>
</tr>
<tr>
<td><strong>ABNORMALITIES</strong></td>
<td></td>
</tr>
<tr>
<td>☐ 7. Appropriate views of abnormalities, if applicable</td>
<td></td>
</tr>
</tbody>
</table>

### Penile / Urethral

#### Labeled images of the following:

<table>
<thead>
<tr>
<th>Penile / Urethral</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>URETHRA</strong></td>
<td></td>
</tr>
<tr>
<td>☐ 1. Longitudinal views of urethra</td>
<td></td>
</tr>
<tr>
<td>☐ 2. Transverse views of urethra</td>
<td></td>
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<tr>
<td><strong>PHALLUS</strong></td>
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<tr>
<td>☐ 3. Longitudinal views of the external portion of the phallus (includes views of the right and left corpora cavernosa and the cavernosal artery)</td>
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<tr>
<td>☐ 4. Transverse images in the proximal, mid and distal portions of the external portion of the phallus</td>
<td></td>
</tr>
<tr>
<td>☐ 5. Size and echogenicity of each corpus cavernosum compared to contralateral side</td>
<td></td>
</tr>
<tr>
<td><strong>CORPORAL VASCULATURE (if indicated):</strong></td>
<td></td>
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<tr>
<td>☐ 6. Vascular integrity documented with color and spectral Doppler, before and after pharmacostimulation</td>
<td></td>
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<tr>
<td>☐ 7. Appropriate spectral Doppler angle of incidence</td>
<td></td>
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<tr>
<td>☐ 8. PSV and EDV measured with at least 3 equal peaks and troughs present</td>
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<tr>
<td>☐ 9. Vascular integrity documented at discrete time intervals</td>
<td></td>
</tr>
<tr>
<td><strong>ABNORMALITIES</strong></td>
<td></td>
</tr>
<tr>
<td>☐ 10. Appropriate views of abnormalities, if applicable</td>
<td></td>
</tr>
</tbody>
</table>