

CEUS Reporting Template Sample: Liver

Procedure: [Contrast Enhanced Ultrasound– (date)]

History: [Risk factor, surgical and medical history]

Indication: [nodule or observation on prior imaging requiring further characterization]

Comparison: [Include modality and date]

Technique: [Real-time ultrasound evaluation of [focal liver observation/other indication] was performed before and after microbubble contrast agent administration, with representative images obtained for documentation.] Examination quality is [appropriate in accordance with [ACR-AIUM-SRU Practice Parameter technical recommendations.] [is compromised by the following factor(s): (.)]

Intravenous contrast agent:

Number of injections [] x [] ml. [] vial of [name of the contrast agent] was used and the rest was discarded.

[Adverse events:]

Findings:

Quality of the study: include greyscale and CEUS as independent evaluations

Observation #: 1/2/3/4/5

Distinct nodule: [Yes/No]

Location: Segment I/II/III/IVa/IVb/V/VI/VII/VIII or lobe right/left

Size: [] x [] [mm/cm]

AP Hyperenhancement: [Yes/No] [whole/in part/mosaic/nodule in nodule/rim/peripheral discontinuous globular/other]

Washout: [Yes/No] [early/late] [mild/marked] washout seen at approximately [] s/m

Hepatic vasculature: [patency, any abnormal findings if applicable]

[Other findings (optional)]

Impression:

[summary of CEUS findings, and recommendation or “no observation on non-contrast US. CEUS was not performed”]

[additional findings as above, or summary]

CEUS Reporting Template Sample: generic

Procedure: [Contrast Enhanced Ultrasound– (date)]

History: [Risk factor, surgical and medical history]

Indication: [nodule or observation on prior imaging requiring further characterization/or other indication]

Comparison: [Include modality and date]

Technique: [Real-time ultrasound evaluation of [focal liver observation/other indication] was performed before and after microbubble contrast agent administration, with representative images obtained for documentation.]

Examination quality is [appropriate in accordance with [ACR-AIUM-SRU Practice Parameter technical recommendations.] [is compromised by the following factor(s): (].]

Intravenous contrast agent:

Number of injections [] x [] ml. [] vial of [name of the contrast agent] was used and the rest was discarded.

[Adverse events:]

Findings:

Quality of the study: include greyscale and CEUS as independent evaluations

- For liver observation/nodule characterization on patients at risk for HCC (cirrhosis of any etiology and chronic HBV with or without cirrhosis), use CEUS LI-RADS template.
- For liver observation/nodule characterization on patients not at risk for HCC describe location, size, assessment of arterial phase/degree and pattern of enhancement, presence of washout/timing and degree if washout, and overall impression.
- For kidney observation/nodule, describe location, size, assessment of arterial phase /degree and pattern of enhancement, presence of washout, and overall impression.
- For other indications, describe the CEUS findings and your impression.

Impression:

[summary of CEUS findings, and recommendation or “no observation on non-contrast US. CEUS was not performed”]

[additional findings as above, or summary]