



THUMB REGION
 1100 S. Van Dyke • Bad Axe, Michigan 48413
 Ultrasound Department

RENAL ARTERY DUPLEX

Name: _____ Date: _____

MR#: _____ Ordered by: _____

DX: _____

RT KIDNEY SIZE: _____ CORTEX: _____

LT KIDNEY SIZE: _____ CORTEX: _____

	RT MRA	Acc. Time
PROX		
MID		
DIST		

	LT MRA	Acc. Time
PROX		
MID		
DIST		

AORTIC VELOCITY:

RT RAR:

LT RAR:

RT ARCUATES

LT ARCUATES

	Velocities	Acc. Time	RI	Velocities	Acc. Time	RI
SUP						
MID						
INF						

TECH: _____

026.119.01-18