Maximize the value of your submission

Submitting the optimal number of ultrasound images, with the quality and format described below, maximizes the diagnostic value of your submission, improves the efficiency with which our radiologists can provide a report, and ultimately enhances your ability to provide prompt and effective care to your patients.

Submission requirements*

1. **A complete sonographic study consists of an appropriate patient history with a maximum of 85 still images, 15 cine loops if indicated, and sonographer interpretation.** Recommended views are listed below. Submitting excess images and cine loops may diminish the diagnostic quality of the study and prolong turnaround times.

2. **Cine loops (i.e., short video clips) are reserved for when pathology is suspected.** In these cases, sonographers are asked to selectively include representative images and cine loops of the organs or structures of interest with a description of their findings.

3. **Images must be in DICOM format with appropriate labels and fit the following criteria:**
   - Each file is smaller than 55 MB (55,000 KB).
   - Images and cine loops use a lossless compression of 70% quality.
   - Cine loop settings have a maximum frame rate of 30 and a length of 2–3 seconds.

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**Liver**

- Right liver
- Gallbladder (GB)
- Right caudal liver—caudate lobe/right kidney (RK)
- Mid-liver—midline—common bile duct (CBD), portal vein (PV), caudal vena cava (CVC), and aorta (AO) may be visible
- Left liver
- Transverse mid-liver (with GB to establish right and left)
- Transverse right and left liver (optional)
- Parenchymal comparison—liver/spleen
  When possible, have the liver and spleen visible in the same still-frame image. If using the split-screen option to show comparison of spleen and liver parenchyma, make sure that the ultrasound machine settings are the same for both images. Otherwise, a parenchymal comparison cannot be made accurately.

**Spleen**

- Sagittal splenic head
- Transverse splenic head
- Sagittal mid-body spleen (can include splenic vein with or without color, or both)
- Transverse spleen mid-body

**Left and right kidney**

- Sagittal midline (with and without measurements)
- Transverse mid-kidney to include renal pelvis and renal papilla

**Left and right adrenal glands**

- Sagittal (with and without measurements)

**Urinary bladder**

- Sagittal midline urinary bladder body
- Sagittal midline of trigone and proximal urethra
- Transverse mid-body urinary bladder

*Note: During a live scan, it is essential that the sonographer be able to recognize normal and abnormal anatomy, evaluate each organ in its entirety, and label all images appropriately. The sonographer should submit images and cine loops as indicated above with an interpretation.
Sublumbar region
- Sagittal sublumbar lymph nodes (right and left medial iliac lymph nodes, with and without measurements)

Pancreas
- Right limb (with and without measurements)
- Body of pancreas
- Left limb (with and without measurements)

Gastrointestinal
- Sagittal stomach (with and without measurements)
- Transverse stomach (with and without measurements)
- Pyloroduodenal junction
- Sagittal duodenum (with and without measurements)
- Transverse duodenum (with and without measurements)
- Duodenal papilla (with and without measurements)
- Sagittal jejunum (2–3 different segments, with and without measurements)
- Transverse jejunum (2–3 different segments, with and without measurements)
- Sagittal colon (with and without measurements)
- Transverse colon—ascending, transverse, and descending (with and without measurements)
- Ileocecocolic junction (ICCJ) (with and without measurements)

Reproductive
Female
- Ovaries
- Sagittal uterus (with and without measurements)
- Transverse uterus (with and without measurements)

Male
- Transverse prostate (with and without measurements)
- Sagittal testicles (right and left)
- Transverse testicles (right and left)

Pathology
- Sagittal views
- Transverse views
- Measurements

Cine loops
You can submit up to 15 cine loops per study to capture areas of interest, specifically those for which pathology is evident on ultrasound or suspected based on patient history, clinical findings, or other diagnostics.

Examples:
- For renal concerns, submit cine loops of the kidneys and urinary bladder, scanning through the entire organ.
- For gastrointestinal (GI) concerns, submit cine loops of the stomach, pyloric outflow, small intestine, colon, and pancreas.
- For hepatic concerns, submit cine loops of the liver, gallbladder, common bile duct, and duodenal papilla.

For more information on our submission requirements, contact our Telemedicine Support Team at 1-800-726-1212.