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Kidney & Bladder Ultrasound

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Sonographer Worksheet

Patient Label Here
(Affix MRN label)

DMS: _____

# of Images: _____

Clinical History: _____

Structure	Observations
Bladder	Pre-void Volume: _____ **cc** ? IVPP: _____ **mm** Post-void Volume: _____ **cc** Urinary Retention: _____ **%**
Bladder Wall	☐ Normal ☐ Thickened ☐ Trabeculated ☐ Diverticula
Bladder Pathology	☐ Absent ☐ Stone ☐ Mass ☐ Other: _____
Right Kidney Size	_____ **cm**
Right Kidney Notes	
Left Kidney Size	_____ **cm**
Left Kidney Notes	

NOTES: