

Focused Cardiovascular Ultrasound (FoCUS)

Reporting Form

Patient name: _____ Patient MRN: _____

Sonographer: _____ Date of study: ____/____/____

Indication: ☐Murmur ☐Heart failure ☐Hemodynamic instability ☐Other: _____

Location of study: ☐Preop clinic ☐Same day surgery ☐OR ☐PACU ☐Other: _____

Quality of study: ☐Adequate ☐Indaequate Second Opinion Requested: ☐No ☐Yes

Left Heart

Size: ☐Small ☐Normal ☐Enlarged **Wall thickness:** ☐Normal ☐Significant hypertrophy

Global Function: ☐Normal ☐Moderate dysfunction ☐Severe dysfunction

Regional wall motion abnormalities: ☐Absent ☐Present **Left atrium:** ☐Not enlarged ☐Enlarged

Right Heart

Size: ☐Small ☐Normal ☐Enlarged **Wall thickness:** ☐Normal ☐Significant hypertrophy

Global Function: ☐Normal ☐Moderate dysfunction ☐Severe dysfunction

Vent Septum: ☐Normal ☐Flat in diastole ☐Flat in systole **Right atrium:** ☐Not enlarged ☐Enlarged

IVC Size: ☐Normal ☐Flat ☐Enlarged **IVC Collapse (Sniff):** ☐NA ☐< 50% ☐> 50%

Pericardial Effusion: ☐Absent ☐Small ☐Large ☐RA syst collapse ☐RV diast collapse

Valves, Masses, Etc.

Aortic Valve: ☐Normal ☐Significant stenosis ☐Coapt defect/significant regurg

Mitral Valve: ☐Normal ☐Significant thickening ☐Coapt defect/significant regurg ☐Large EPSS

Systolic Anterior Motion of MV: ☐Absent ☐Present ☐Present with Obstruction

Tricuspid Valve: ☐Normal ☐Significant thickening ☐Coapt defect/significant regurg

Masses: ☐None ☐On AV ☐On MV ☐Cavitary **Lung Sliding:** ☐Bilat ☐Absent R ☐Absent L

Other pertinent findings: _____

Conclusions: _____

