

# CKiD carotid IMT Worksheet

Clinical Site #: \_\_\_\_\_

Subject ID #: \_\_\_\_\_

Sonographer Initials: \_\_\_\_\_

Date of Study: \_\_\_\_\_

## Regular Study Visit:

- V2
- V6
- V10
- V14
- V18

Irregular Visit \_\_\_\_

## Post RRT Study Visits:

### *Post-Dialysis*

- DV1b  DV6  DV11
- DV2  DV7  DV12
- DV3  DV8  DV13
- DV4  DV9  DV14
- DV5  DV10  DV15

### *Post-Transplant*

- TV2  TV10
- TV4  TV12
- TV6  TV14
- TV8  TV16

Is this a Repeat carotid IMT?  Yes  No

## Sonographer Checklist

### Check When Carotid IMT Study Completed

1. \_\_\_\_\_ All of the above worksheet data filled in.
2. \_\_\_\_\_ Subject ID and site number entered correctly on CD (no patient name is to be listed on CD or worksheet)
3. \_\_\_\_\_ Completed CKiD vascular study including the following images:
  - a) \_\_\_\_\_ Cross-sectional right carotid artery view (10 cardiac cycles) (**Carotid Image #3**)
  - b) \_\_\_\_\_ Longitudinal bifurcation right carotid artery view (10 cardiac cycles) (**Carotid Image #1**)
  - c) \_\_\_\_\_ Longitudinal right carotid artery view optimizing the distal 2 cm of CCA for IMT measures (10 cardiac cycles) (**Carotid Image #2**)
  - d) \_\_\_\_\_ Cross-sectional left carotid artery view (10 cardiac cycles) (**Carotid Image #6**)
  - e) \_\_\_\_\_ Longitudinal bifurcation left carotid artery view (10 cardiac cycles) (**Carotid Image #4**)
  - f) \_\_\_\_\_ Longitudinal left carotid artery view (10 cardiac cycles) (**Carotid Image #5**)
4. \_\_\_\_\_ CD stored. CD labeled with clinical site, patient ID and study date.

### Instructions for CKiD Sonographer:

Scan this form. Keep the original form for CKiD records. Upload this form, the Sonographer Self-Critique form and images to the CICRL via AMBRA.

Sites are encouraged to upload the files via AMBRA. However, if a site is not set-up to use AMBRA, copies of the CD and forms can be mailed to:

**CCHMC**  
**Attn: Lauren Longshore Brown**  
**Cardiology Dept., ML 2003**  
**3333 Burnet Ave.**  
**Cincinnati, OH 45229**

*Contact your CCC for a FedEx slip (if needed) and it will be emailed to you.*

For technical questions, contact Lauren Longshore Brown at [Lauren.Longshore@cchmc.org](mailto:Lauren.Longshore@cchmc.org) or by phone at 513-803-5517.