
Procedure Title: **Arterial Doppler Ultrasound (Arm)**

Patient Name: _____

Appointment Time:

When: _____ Date: _____ Time: _____

Where: You will report to the Admitting area on the 1st floor of Daviness Community Hospital.

Purpose : This test uses sound waves to take images of the arteries in your arm. This scan is safe and painless. There is no radiation involved.

Preparation: There is no prep for this examination.

Procedure: This examination usually takes about 45 minutes. A water-based gel will be applied over the inside and front of your arm and upper chest. A plastic device called a transducer will be moved over your arm to obtain the necessary images for the Radiologist. You will hear sounds during this examination. This will be blood flowing through the vessels. This is normal.

After Care: You may resume all normal activities after the test. Follow up with your attending physician to discuss results. Results usually are available to the physician in 2 business days.

Please call (812) 254-8851 to speak with an ultrasound technologist if you have any questions.

Reviewed: 11/11/2014