



Issue: Antenatal Ultrasound Report Form (Informal)

Raised by: Sheryl Alexander (CA Outreach Midwife)

Background: A recently completed Commonwealth trial in Central Australia has resulted in the donation of a portable ultrasound unit for use in DHCS remote health centres. A number of staff are trained in the use of these machines (through the trial) and are able to continue performing dating scans at remote sites. While there has been designated paperwork used in the tripartite trial, use of the ultrasound units will now be part of routine DHCS operations, and consequently dedicated documentation is required.

The development of a reporting form will be utilised by users of the ex trial equipment, but may also be used when other remote based antenatal scanning is performed (e.g. MSOAP)

Discussion: The need for a form to record measurements noted at dating scans and related information, along with placement of print out copies of scan images, is acknowledged.

Although the Commonwealth funded trial included a mechanism for Flinders Medical Centre review of performed scans, there are currently no arrangements for formal reporting of scans performed in Remote. As such, the proposed form is simply to record details of scans performed, albeit officially, yet without radiologist comment.

The form is required as a report to send with A/N records to the referral hospital.

It is acknowledged the use of such a form is limited, but is worth producing, and will be available for further occasions when portable ultrasound units are utilised in remote health centres.

Consultation: Best Practice / Sheryl Alexander only

References: Other examples of provisional ultrasound report forms

Outcome: A form "Antenatal Medical Imaging Informal Report" has been produced and endorsed for this specific need.

The form will only be distributed to those individuals performing antenatal ultrasound scans in Remote.

The form is titled "Antenatal Medical Imaging Informal Report" and is part of the "Remote Health" branch of the Northern Territory Government's Department of Health and Community Services. It includes fields for Client information (Name, HRN, Community, Date of Birth), History (Parity), and Ultrasound scan details (Date of scan, Practitioner, Signed, Gestational Sac, Placental position, FH, CRL, BPD, FL, FHM, Est. Gestational Age by dates, Gestational Age by U/S measurement, Est. Gestational Age by palp, E.D.C. by U/S measurements). There is a large area for Comments and a photo placeholder. The form is dated 12/2006 and includes a checkbox for "Copy sent to Regional Hospital".