

## **AORTA:**

- Prep: Patient NPO for 4 hours
- Basic Principles: Use appropriate transducer for patient body habitus. Patient position to vary based on anatomy.
- Examination should include the following:
  - Longitudinal images – along the long axis of the vessel
    - Proximal (below diaphragm, near the celiac artery)
    - Mid (near level of the renal arteries)
    - Distal (above the iliac bifurcation)
    - Right and Left proximal common iliac arteries
  - Transverse images – perpendicular to the long axis of the vessel
    - Proximal (below diaphragm, near the celiac artery)
    - Mid (near level of the renal arteries)
    - Distal (above the iliac bifurcation)
    - Right and Left proximal common iliac arteries
  - **Measurements:**
    - Measurements of the proximal, mid, distal aorta and the proximal right and left iliac arteries should be taken at the greatest diameter and from outer edge to outer edge.
    - If an aneurysm is present, the maximal size and location of the aneurysm should be documented and recorded
    - The relationship of the dilated segment to the renal arteries and to the aortic bifurcation should be determined.
      - A measurement of the length of the aneurysm is NOT necessary.
  - Color Doppler imaging and/or spectral Doppler with waveform analysis of the aorta and iliac arteries may be helpful to demonstrate patency and the presence of intraluminal thrombus.