

# ***GUNDERSEN HEALTH SYSTEM ULTRASOUND DEPARTMENT POLICY AND PROCEDURE MANUAL***

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SUBJECT: Ultrasound of Palpable Lump

SECTION: Ultrasound

DATE: February 20, 2018

APPROVED BY: \_\_\_\_\_

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## **Prep:**

- No specific prep
- Patient worksheet

## **Technique:**

1. Sonographic evaluation of palpable lump using predominately high frequency transducer.  
Variety of transducers and frequency at sonographer's discretion

## **Imaging Protocol:**

Fill out patient questionnaire with patient

The following images represent the complete exam. Additional images may be necessary for proper documentation.

- Longitudinal image of the palpable lump/fullness
  - Label to include specific anatomic location and palpable lump
- Transverse image of lump/fullness
  - Label to include specific anatomic location and palpable lump
- 3 plane measurements if palpable lesion is detected
  - Longest diameter
  - Perpendicular to longest diameter
  - Transverse diameter orthogonal to longest diameter
- Color Doppler image of lump/fullness in plane that lesion is best visualized.
- Clearly label or arrow what patient is palpating
  - *For example, if multiple lymph nodes in area, label which node is palpable*
- If no lesion detected:
  - Side by side image of palpable area and corresponding contralateral side. Try to best recreate the same scan plane
  - Decrease frequency and image deeper structures when applicable (ie extremity, abdomen, back)
    - If extremity, include bone in deep FOV
    - If abdomen/pelvis, include deep to abdominal wall

### **Palpable lump questionnaire**

- 1. Palpated by patient, provider, both?**
  
- 2. How long palpated?**
  
- 3. Has it changed in size/shape?**
  
- 4. Any position or activity make it bigger/smaller? (ie, standing, lay down, raise arm, etc)**
  
- 5. Tenderness or pain?**
  
- 6. Skin discoloration/drainage or other skin changes?**
  
- 7. History of trauma/surgery/foreign body/infection to this area?**
  
- 8. For sonographer**
  - a. Can you palpate lump?**
  
  - b. Soft/firm?**
  
  - c. Mobile/fixed?**
  
- 9. Any other additional information?**