General Ultrasound Imaging

What is General Ultrasound Imaging?

Ultrasound imaging, also called ultrasound scanning or sonography, involves exposing part of the body to high-frequency sound waves to produce pictures of the inside of the body. Ultrasound exams do not use ionizing radiation (x-ray). Because ultrasound images are captured in real-time, they can show the structure and movement of the body’s internal organ, as well as blood flowing through blood vessels.

Ultrasound imaging is usually a painless medical test that helps physicians diagnose and treat medical conditions.

Conventional ultrasound displays the images in thin, flat sections of the body. Advancements in ultrasound technology include three-dimensional (3-D) ultrasound that formats the sound wave data into 3-D images. Four-dimensional (4-D) ultrasound is 3-D ultrasound in motion.

A Doppler ultrasound study may be part of an ultrasound examination.

Doppler ultrasound is a special ultrasound technique that evaluates blood as it flows through a blood vessel, including the body’s major arteries and veins of the arms, legs and neck.

There are three types of Doppler ultrasound:

- **Color Doppler** uses a computer to convert Doppler measurements into an array of colors to visualize the speed and direction of blood flow through a blood vessel.

- **Power Doppler** is a newer technique that is more sensitive than color Doppler and capable of providing greater detail of blood flow, especially in vessels that are located inside organs. Power Doppler, however, does not help the radiologist determine the direction of flow, which may be important in some situations.

- **Spectral Doppler**. Instead of displaying Doppler measurements visually, Spectral Doppler displays blood flow measurements graphically, in terms of the distance traveled per unit of time.

What are some common uses of the procedure?

Ultrasound examinations can help to diagnose a variety of conditions and to assess organ damage following illness.

Ultrasound is used to help physicians diagnose symptoms such as:

- pain
- swelling
- infection

Ultrasound is a useful way of examining many of the body's internal organs, including but not limited to the:

- heart and blood vessels, including the abdominal aorta and its major branches
- liver
- gallbladder
- spleen
- pancreas
- kidneys
- bladder
- uterus, ovaries, and unborn child (fetus) in pregnant patients
- eyes
- thyroid and parathyroid glands
- scrotum (testicles)
Ultrasound is also used to:

- guide procedures such as needle biopsies, in which needles are used to extract sample cells from an abnormal area for laboratory testing.
- image the breasts and to guide biopsy of breast cancer.
- diagnose a variety of heart conditions and to assess damage after a heart attack or other illness.

Doppler ultrasound images can help the physician to see and evaluate:

- blockages to blood flow (such as clots)
- narrowing of vessels (which may be caused by plaque)
- tumors and congenital malformation

With knowledge about the speed and volume of blood flow gained from a Doppler ultrasound image, the physician can often determine whether a patient is a good candidate for a procedure like angioplasty.

**How should I prepare?**

You should wear comfortable, loose-fitting clothing for your ultrasound exam. You will need to remove all clothing and jewelry in the area to be examined.

You may be asked to wear a gown during the procedure.

Other preparation depends on the type of examination you will have. For some scans your doctor may instruct you not to eat or drink for as many as 12 hours before your appointment. For others you may be asked to drink up to six glasses of water two hours prior to your exam and avoid urinating so that your bladder is full when the scan begins.

**What does the equipment look like?**

Ultrasound scanners consist of a console containing a computer and electronics, a video display screen and a transducer that is used to scan the body. The transducer is a small hand-held device that resembles a microphone, attached to the scanner by a cord. The transducer sends out a high frequency sound wave and then listens for a returning sound wave or “echo”.

The ultrasound image is immediately visible on a nearby screen that looks much like a computer or television monitor. The image is created based on the amplitude (strength), frequency and time it takes for the sound signal to return from the patient to the transducer.

**How does the procedure work?**

Ultrasound imaging is based on the same principles involved in the sonar used by bats, ships and fishermen. When a sound wave strikes an object, it bounces backward, or echoes. By measuring these echo waves it is possible to determine how far away the object is and its size, shape, consistency (whether the object is solid, filled with fluid, or both) and uniformity.

In medicine, ultrasound is used to detect changes in appearance and function of organs, tissues, or abnormal masses, such as tumors.

In an ultrasound examination, a transducer both sends the sound waves and records the echoing waves. When the transducer is pressed against the skin, it directs a stream of inaudible, high-frequency sound waves into the body. As the sound waves bounce off of internal organs, fluids and tissues, the sensitive microphone in the transducer records tiny changes in the sound's pitch and direction. These signature waves are instantly measured and displayed by a computer, which in turn creates a real-time picture on the monitor. These live images are usually recorded on videotape and one or more frames of the moving pictures are typically captured as still images.

Doppler ultrasound, a special application of ultrasound, measures the direction and speed of blood cells as they move through vessels. The movement of blood cells causes a change in pitch of the reflected sound waves (called the Doppler effect). A computer collects and processes the sounds and creates graphs or pictures that represent the flow of blood through the blood vessels.

**How is the procedure performed?**

For most ultrasound exams, the patient is positioned lying face-up on an examination table that can be tilted or moved.

A clear gel is applied to the area of the body being studied to help the transducer make secure contact with the body and eliminate air pockets between the transducer and the skin. The sonographer or radiologist then presses the transducer firmly against the skin and sweeps it back and forth over the area of interest.
Doppler sonography is performed using the same transducer.

When the examination is complete, the patient may be asked to dress and wait while the ultrasound images are reviewed. However, the sonographer or radiologist is often able to review the ultrasound images in real-time as they are acquired and the patient can be released immediately.

In some ultrasound studies, the transducer is attached to a probe and inserted into a natural opening in the body. These exams include:

- **Transesophageal echocardiogram.** The transducer is inserted into the esophagus to obtain images of the heart.
- **Transrectal ultrasound.** The transducer is inserted into a man's rectum to view the prostate.
- **Transvaginal ultrasound.** The transducer is inserted into a woman's vagina to view the uterus and ovaries.

Most ultrasound examinations are completed within 30 minutes to an hour.

**What will I experience during and after the procedure?**

Most ultrasound examinations are painless, fast and easy.

After you are positioned on the examination table, the radiologist or sonographer will spread some warm gel on your skin and then press the transducer firmly against your body, moving it back and forth over the area of interest until the desired images are captured. There may be varying degrees of discomfort from pressure as the transducer is pressed against the area being examined.

If scanning is performed over an area of tenderness, there may be pressure or minor pain associated with the procedure.

Ultrasound exams in which the transducer is attached to a probe and inserted into an opening of the body may produce minimal discomfort.

If a Doppler ultrasound study is performed, you may actually hear pulse-like sounds that change in pitch as the blood flow is monitored and measured.

Once the imaging is complete, the gel will be wiped off your skin.

After an ultrasound exam, you should be able to resume your normal activities.

**Who interprets the results and how do I get them?**

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care or referring physician, who will share the results with you. In some cases the radiologist may discuss preliminary results with you at the conclusion of your examination.

**What are the benefits vs. risks?**

**Benefits**

- Ultrasound scanning is noninvasive (no needles or injections) and is usually painless.
- Ultrasound is widely available, easy-to-use and less expensive than other imaging methods.
- Ultrasound imaging uses no ionizing radiation.
- Ultrasound imaging gives a clear picture of soft tissues that do not show up well on x-ray images.
- Ultrasound causes no health problems and may be repeated as often as is necessary if medically indicated.
- Ultrasound is the preferred imaging modality for the diagnosis and monitoring of pregnant women and their unborn infants.
- Ultrasound provides real-time imaging, making it a good tool for guiding minimally invasive procedures such as needle biopsies and needle aspiration of fluid in joints or elsewhere.

**Risks**

- For standard diagnostic ultrasound there are no known harmful effects on humans.
What are the limitations of General Ultrasound Imaging?

Ultrasound waves are reflected by air or gas; therefore ultrasound is not an ideal imaging technique for the bowel. In most cases, barium exams and CT scanning are the methods of choice for bowel-related problems.

Ultrasound waves do not pass through air; therefore an evaluation of the stomach, small intestine and large intestine may be limited. Intestinal gas may also prevent visualization of deeper structures such as the pancreas and aorta. Patients who are obese are more difficult to image because tissue attenuates (weakens) the sound waves as they pass deeper into the body.

Ultrasound has difficulty penetrating bone and therefore can only see the outer surface of bony structures and not what lies within. For visualization of bone, other imaging modalities such as MRI, are typically used.

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