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Worksheet Only
Must Complete Online
(See Online Testing)



Nuclear Medicine/PET Accreditation Program

Clinical Test Image Data Sheet

I131 Spot Imaging

Exam type: Normal Abnormal

Patient ID Data: Date of Study _____

PATIENT IMAGE

Radiopharmaceutical		
Agent: <input type="checkbox"/> I131 <input type="checkbox"/> Other		
Dose: mCi		
Whole Body Study <i>Please complete all fields. If a field is not applicable, please enter "0".</i>		
<input type="checkbox"/> Single detector <input type="checkbox"/> Dual detector <input type="checkbox"/> Other		
Collimator: <input type="checkbox"/> HEPH <input type="checkbox"/> Other _____		
	Anterior View	Posterior View
Scan Speed	cms/min	cms/min
Total Counts	k cts	k cts
Total Time	minutes	minutes
Spot Image Study		
Counts/Image		
Body	k cts	k cts
Head/Neck	k cts	k cts
Extremities	k cts	k cts