

Obstetrics and Gynecology (OB/GYN) Tasks	
Anatomy and Physiology	32%
<i>Normal Anatomy and Physiology</i>	
Assess the cervix	
Perform both gynecological and obstetrical exams	
GYN	
Assess and record uterine position	
Assess both adnexa	
Assess the posterior and anterior cul-de-sac	
Assess the texture of the endometrium	
Evaluate the contour of the uterus	
Evaluate the myometrial texture	
Perform exams of pelvic area outside of reproductive and supporting structures	
Perform exams on postmenopausal patients	
Perform gynecological exams	
Perform sonography exams in postmenarchal and premenopausal patients	
Perform sonography exams in premenarchal patients	
OB	
Assess multiple pregnancies for chorionicity and amnionicity	
Assess posterior fossa	
Assess the appearance of fetal bowel	
Assess the cardiac axis	
Assess the choroid plexus	
Assess the facial profile	
Assess the fetal neck	
Assess the fetal orbits	
Assess the lateral ventricles	
Assess the shape of the fetal head at the level of the BPD	
Document the aortic arch	
Document the fetal adrenal glands	
Document the fetal diaphragm	
Document the insertion of the umbilical cord in the placenta	
Establish the placental grade	
Evaluate the cardiac size in the thorax	
Evaluate the fetal gall bladder	
Evaluate the fetal liver	
Evaluate the renal pelvis	
Evaluate the size of the fetal thorax	
Evaluate the texture of the fetal lungs	
Examine the fetal genitalia	
Identify a dichorionic-diamniotic twin pregnancy	
Identify a monochorionic - monoamniotic twin pregnancy	
Identify a monochorionic–diamniotic twin pregnancy	
Identify higher order multiple pregnancy, e.g., triplets, quadruplets, etc.	
Look at the fetal ankles and feet	
Look for multiple gestations	
Look for the amniotic membrane in the gestational sac in first trimester singleton pregnancies	

Look for the double decidual sac sign
Look for the lens of the eye
Look for the thalami
Look for the yolk sac
Look specifically for the fetal hands/fingers
Perform exams in the second trimester of pregnancy
Perform exams in the third trimester of pregnancy
Perform exams on high-risk pregnancies
Perform first trimester obstetric exams
Perform second and third trimester exams
<i>Perfusion and Function</i>
OB
Evaluate the fetal heart for normal cardiac rhythm
Perform biophysical profiles
Pathology 35%
<i>Abnormal Perfusion and Function</i>
OB
Identify twin-transfusion syndrome or other problems associated with monochorionic twins
<i>Abnormal Physiology</i>
OB
Encounter a fetus exhibiting intrauterine growth restriction
Encounter a pregnancy with anhydramnios
Encounter a pregnancy with oligohydramnios
Encounter a pregnancy with polyhydramnios
Encounter a thickened nuchal translucency
Encounter an anembryonic pregnancy
Encounter an enlarged or echogenic yolk sac
Encounter embryonic demise
Identify fetal demise
<i>Congenital Anomalies</i>
GYN
Assess female patients for chromosomal anomalies, e.g. Turner's syndrome, ambiguous genitalia, other
Encounter Müllerian duct developmental anomalies, e.g. septated, subseptate, unicornis uterus
Encounter vaginal congenital anomalies
OB
Encounter a fetus with a kidney mass
Encounter a fetus with a skeletal abnormality
Encounter a fetus with an abdominal wall defect
Encounter a fetus with an intestinal deformity (e.g., esophageal atresia, small bowel atresia, bowel obstruction of any kind, organ defect, other)
Encounter a fetus with an umbilical cord anomaly
Encounter a fetus with cystic hygroma
Encounter a fetus with diaphragmatic hernia
Encounter a fetus with heart anomalies
Encounter a fetus with holoprosencephaly
Encounter a fetus with other chest anomalies
Encounter a fetus with other neck anomalies

Encounter a fetus with skeletal dysplasia (dwarfism) syndrome
Encounter a lethal fetal head anomaly, e.g., anencephaly, acrania, hydranencephaly, other
Encounter enlarged ventricles in the head
Encounter facial deformities, e.g. cleft defect, other
Encounter orbital abnormalities
Identify a fetus with a bladder abnormality
Identify a fetus with a chromosomal abnormality
Identify a fetus with a genital abnormality
Identify a fetus with a spinal abnormality
Identify a fetus with a urinary obstruction
Identify a fetus with an abnormality of the kidneys
Identify a fetus with an adrenal abnormality
Identify a fetus with an inherited disease involving the kidneys (e.g., autosomal recessive polycystic kidney disease, autosomal dominant polycystic disease, Meckel-Gruber syndrome, other)
Identify a fetus with renal agenesis
Identify conjoined twins
Identify hydatidiform mole, complete or partial
<i>Pelvic Abnormalities</i>
GYN
Encounter cervical pathology
Encounter complex ovarian masses
Encounter cul-de-sac echo-free fluid
Encounter cul-de-sac fluid containing echoes
Encounter dermoid cysts
Encounter endocervical polyps
Encounter endometrial carcinoma
Encounter endometrial fluid
Encounter endometrial hyperplasia
Encounter endometrial polyps
Encounter endometrioma(s)
Encounter hydrosalpinx
Encounter other adnexal pathology
Encounter other uterine myometrial masses
Encounter ovarian cyst(s)
Encounter ovarian solid masses
Encounter pelvic inflammatory disease
Encounter pyosalpinx
Encounter tubo-ovarian complex or abscess
Encounter uterine leiomyomas
Encounter vaginal pathology
OB
Encounter a pregnancy complicated by maternal diabetes
Encounter a pregnancy complicated by maternal drug or alcohol abuse
Encounter a pregnancy complicated by other maternal disease e.g., syphilis, systemic lupus erythematosus, preeclampsia, other
Encounter an ectopic pregnancy
<i>Placental Abnormalities</i>

OB
Encounter a placental abruption
Identify a marginal cord insertion into the placenta
Identify a placenta previa
Identify a placental mass
Identify a vasa previa
Identify a velamentous (membranous) cord insertion into the placenta
Identify an accessory lobe of the placenta
Identify an eccentric cord insertion into the placenta
Identify placenta accreta, increta, percreta
Integration of Data 7%
<i>Incorporate outside data (Clinical assessment, Health & Physical [H&P], Lab values)</i>
Obtain pertinent clinical history as a part of the exam
Review lab results as a part of the exam
OB
Use results of maternal serum screening markers to assist in assessing fetal anatomy
Attempt to correlate hCG levels with abnormal pregnancies (e.g., ectopic, hydatidiform mole, invasive trophoblastic disease, other)
Tailor the exam to evaluate pregnancies where a maternal and/or fetal condition indicates a potential complication
Use the 1st or 3rd international reference preparation when evaluating hCG levels
<i>Reporting Results</i>
Inform the supervising physician of findings that may be of an emergent nature
<i>Serial Studies</i>
Check the results of a previous ultrasound exam
Protocols 15%
<i>Clinical Standards and Guidelines</i>
Perform quality assurance checks on the equipment
GYN
Use both transabdominal and transvaginal scans in gynecological patients with approximately equal frequency
Use transabdominal scans in gynecologic patients
Use transvaginal scans in gynecological patients
OB
Assess amniotic fluid
Assess the cisterna magna
Assess the fetal spine in long axis
Assess the fetal spine in transverse/axial views
Assess the nose and lips
Assess the number of vessels in the cord
Assess the shape of the cerebellum
Document placental location
Document the fetal bladder
Document the fetal kidneys
Document the fetal number
Document the fetal stomach
Document the four-chamber view of the fetal heart

Document the insertion of the umbilical cord in the fetal abdomen
Document the right and left ventricular outflow tracts
Document uterine, ovarian, or other adnexal areas when assessing a gravid patient
Encounter an incompetent cervix
Establish fetal lie and presentation
Look at the lower extremities
Look for adnexal masses/cysts when assessing a gravid patient
Look for the cavum septi pellucidi
Look for the upper extremities of the fetus
Require maternal bladder filling in preparation for a first trimester ultrasound
Require maternal bladder filling in preparation for a second trimester ultrasound
Use both transabdominal and transvaginal scans in first trimester obstetric patients
Use both transvaginal and transabdominal scans in second trimester patients
Use both transvaginal and transabdominal scans in third trimester patients
Use transabdominal scans in first trimester obstetric patients
Use transvaginal scans in first trimester obstetric patients
Measurement Techniques
Measure cervical length
Measure Doppler waveform parameters
Measure uterine depth
Measure uterine length
Measure uterine width
GYN
Alter the way you measure the endometrial walls (thickness) if fluid is visualized in the endometrial cavity
Calculate ovarian volume
Measure both walls of the endometrium
Measure the endometrium in the antero-posterior diameter
Measure the ovarian depth
Measure the ovarian length
Measure the ovarian width
OB
Assess the cephalic index
In the first trimester, measure gestational sac using the mean sac diameter
Measure femur length
Measure other bones (other than those specified above)
Measure the abdomen circumference
Measure the amniotic fluid index (AFI)
Measure the atrium of the lateral ventricles
Measure the BPD
Measure the cerebellum
Measure the cisterna magna/posterior fossa
Measure the crown-rump length
Measure the distance from the atrium wall to the choroid plexus
Measure the head circumference
Measure the humerus length
Measure the inner orbital distance
Measure the nasal bone

Measure the nuchal fold between 15 and 20 weeks gestation
Measure the nuchal translucency in the first trimester
Measure the orbit
Measure the outer orbital distance
Measure the radius
Measure the thickness of the placenta
Measure the ulna
Measure the yolk sac
Use the single deepest pocket method for assessing amniotic fluid
Use the subjective method for assessing amniotic fluid
<i>Non-Sonographic Techniques</i>
Review other relevant studies (e.g., X-ray, MRI, etc.) as a part of the exam
Physics and Instrumentation 9%
<i>Hemodynamics</i>
Use Doppler to assess the uterine arteries
GYN
Use Doppler to assess ovarian vasculature
OB
Assess the middle cerebral artery with Doppler
Document embryonic and/or fetal cardiac activity
Use Doppler to assess the umbilical cord vessels
Use Doppler to assess venous structures in the fetus
Utilize Doppler to assess embryonic and/or fetal heart rate
Utilize M-mode to assess embryonic and/or fetal heart rate
<i>Imaging Instruments</i>
Use a curved linear array transducer
Use a linear array transducer
Use a phased array sector transducer
Use B-color scans
Use color-flow imaging
Use harmonics
Use M-mode
Use power (angio, amplitude) Doppler
Use pulsed spectral Doppler
Use spatial compounding
GYN
Use 3-D or so-called 4-D scanning with gynecological patients
OB
Use 3-D or so-called 4-D scanning with obstetric patients
Treatment 2%
<i>Sonographer Role in Procedures</i>
Participate in any contrast procedures of the pelvis
GYN
Assist in oocyte retrieval/IVF
Perform an ultrasound of the pelvis during sonohysterography
Perform an ultrasound of the pelvis prior to sonohysterography
Perform exams for assisted reproduction techniques

OB

Perform exams to assist with amniocentesis after 15 weeks

Perform exams to assist with fetal or embryonic reduction

Perform exams to assist with other fetal intervention techniques (e.g., amnioreduction, shunt placement, other)

Perform exams to assist with percutaneous umbilical blood sampling

Perform exams to assist with transabdominal chorionic villus sampling

Perform exams to assist with transvaginal chorionic villus sampling