


# PADnet™+ Venous Report

Cover page

**BioMedix Associates, PC**  
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Liverpool, NY 55555  
(555) 123-4567



**LOWER EXTREMITY VENOUS TESTING**

Name	Telephone #	SSN/MN	Sex	Age	Date of Exam
Margaret Hughes	(812) 123-4567	111-22-3333	Female	71	03/25/2010
Referring Physician	Telephone #	Account #	Date of Birth	Previous Exam	
Don Holmberg	(885) 123-4567	123454321	09/18/1938	03/25/2007	

**Risk Factors:** Diabetes: Yes Hypertension: Yes Tobacco: No Hyperlipidemia: No  
**Assoc. Areas:** Cardiac: Yes Carotic: No Pulmonary: No Renal: No  
**Indications:** Inflammation of vein (both sides, thigh), Varicose veins (both sides, thigh, ulcer)

**Notes:** Patient is currently taking drugs for Hypertension

Right	Results	Left
F0 Time (seconds) 24.1 Findings Normal		F0 Time (seconds) 26.9 Findings Normal

**Interpretation**

No indication of Venous insufficiency in both legs.  
 Patient shows no signs of disease. Please use other testing methods to determine reasons for reported symptoms.

*Rick Grove*      Electronic signature      *William Howard*      Electronic signature  
 Rick Grove      Technologist: 03/25/2010      William Howard      Physician: 03/25/2010

Searchable patient name

Technologist's test notes

Interpretation by reading physician

User-defined library of interpretation statements for each reading physician

Practice logo

Reason for the study (Indications)

Venous refill time, findings & severity (by reading physician)

Technologist and reading physician signatures automatically inserted



PADnet is Approved

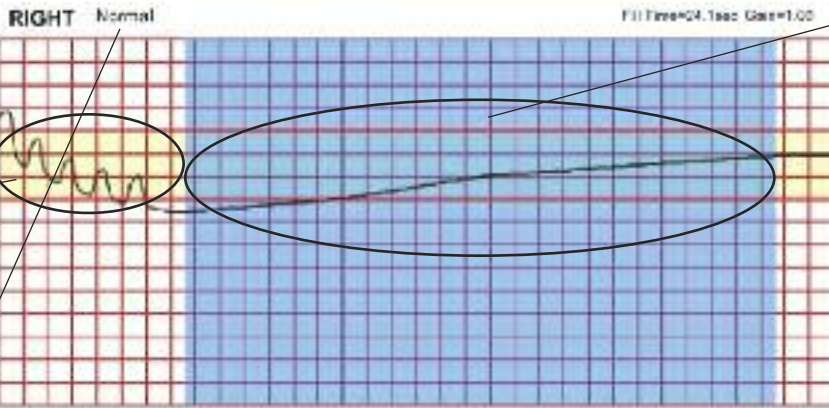
The American College of FOOT & ANKLE ORTHOPEDICS & MEDICINE

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Venous waveforms

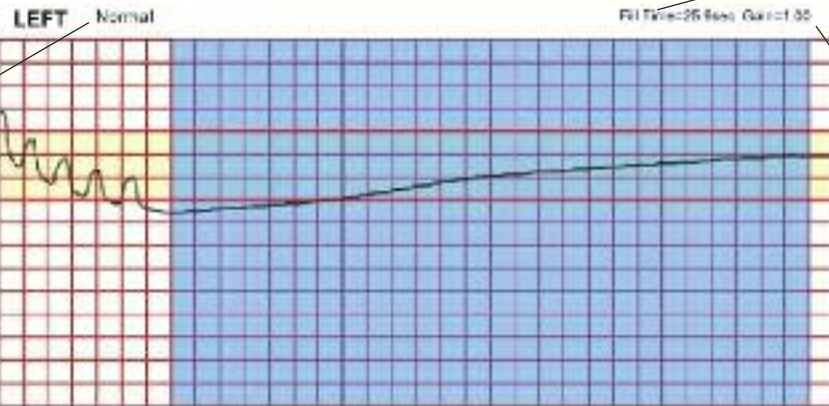
Name: Margaret Hughes  
SSN/PIN: 111-22-3333  
Date of Exam: 03/25/2010

## Lower Extremity Venous Waveforms



Venous refill time (1 block=1 second)

Effects of dorsiflexion maneuver



Fill time displays the venous refill time (in sec.)

Interpretation from reading physician

Gain setting affects height of waveforms  
Note: default gain is 1.0