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Worksheet Only
Must Complete Online
(See Online Testing)



**Perfusion Lung Imaging** 

## **Clinical Test Image Data Sheet**

## **Nuclear Medicine Accreditation Program**

Exam type:   Normal  Abnormal
Date of Study:
Patient age:
Reason for exam:
PATIENT IMAGE DATA
Radiopharmaceutical
Was ventilation acquired? ☐ Yes ☐ No (if yes, ventilation images must be uploaded)
Agent: □ TcDPTA □ Xe-133 □ Other Dose: mCi
Agent: □ TcMAA □ Other Dose: mCi
Collimator:   LEAP LEHR LEUHR Other
Views: (Select applicable) ☐ ANT ☐ POS ☐ LPO ☐ RPO ☐ LAO ☐ RAO ☐ LLT ☐ RLT
o Counts/Image: k cts o Time/Image: secs
Was SPECT imaging performed? ☐ Yes ☐ No
If SPECT imaging was performed, you MUST upload both the SPECT and Planar images or your image submission may be rejected.