Date: Wednesday, February 28, 2024
Office: Pauly
Sonographer: Sheri Bono-Striegel, RVT

12:03: PM

CardioRisk Laboratories
At the Heart of Good Health

Enter Start Time Here: 8:00 a

Link to spreadsheet instructions

Representative of Pauly

Full Name: Elizabeth Boyd

Initial Here: E B

Date Signed: 2/28/2024

Sheri Bono-Striegel, RVT
CardioRisk Laboratories Vascular Sonographher,Certified in CIMT

# Scheduled 3				Totals	3	3	0	3	2	2	Not Scanned CX / No Show: 0	Comp Scans: 0
#		Patient ID (LAST,FIRST__MM-DD-YYM/F)M	Ordered Exam(s)	Provider	PRIOR	CIMT	DOPPLER	AAA	FIMT	ABI	Comments	
1	8:00 a	ROBERTS,STEVEN__11-27-82M	CIMT/ FIMT/ AAA/ ABI	PAULY	☑	☑	☐	☑	☑	☑	ENLARGED LYMPHNODE SEEN IN LEFT GROIN AREA MEASURING 2.1 X .5 X 1.1CM.	
2	8:15 a	BOYD,ELIZABETH__04-07-89F	CIMT/ AAA	PAULY	☑	☑	☐	☑	☐	☐		
3	8:30 a	BASIL,VINCENT__09-07-85M	CIMT/ FIMT/ AAA/ ABI	PAULY	☑	☑	☐	☑	☑	☑		
4	8:45 a				☐	☐	☐	☐	☐	☐		
5	9:00 a				☐	☐	☐	☐	☐	☐		
6	9:15 a				☐	☐	☐	☐	☐	☐		
7	9:30 a				☐	☐	☐	☐	☐	☐		
8	9:45 a				☐	☐	☐	☐	☐	☐		
9	10:00 a				☐	☐	☐	☐	☐	☐		
10	10:15 a				☐	☐	☐	☐	☐	☐		
11	10:30 a				☐	☐	☐	☐	☐	☐		
12	10:45 a				☐	☐	☐	☐	☐	☐		
13	11:00 a				☐	☐	☐	☐	☐	☐		
14	11:15 a				☐	☐	☐	☐	☐	☐		
15	11:30 a				☐	☐	☐	☐	☐	☐		
16	11:45 a				☐	☐	☐	☐	☐	☐		
17	12:00 p				☐	☐	☐	☐	☐	☐		
18	12:15 p				☐	☐	☐	☐	☐	☐		
19	12:30 p				☐	☐	☐	☐	☐	☐		
20	12:45 p				☐	☐	☐	☐	☐	☐		
21	1:00 p				☐	☐	☐	☐	☐	☐		
22	1:15 p				☐	☐	☐	☐	☐	☐		
23	1:30 p				☐	☐	☐	☐	☐	☐		
24	1:45 p				☐	☐	☐	☐	☐	☐		
25	2:00 p				☐	☐	☐	☐	☐	☐		
26	2:15 p				☐	☐	☐	☐	☐	☐		
27	2:30 p				☐	☐	☐	☐	☐	☐		
28	2:45 p				☐	☐	☐	☐	☐	☐		
29	3:00 p				☐	☐	☐	☐	☐	☐		
30	3:15 p				☐	☐	☐	☐	☐	☐		
31	3:30 p				☐	☐	☐	☐	☐	☐		
32	3:45 p				☐	☐	☐	☐	☐	☐		
33	4:00 p				☐	☐	☐	☐	☐	☐		
34	4:15 p				☐	☐	☐	☐	☐	☐		
35	4:30 p				☐	☐	☐	☐	☐	☐		
36	4:45 p				☐	☐	☐	☐	☐	☐		
37	5:00 p				☐	☐	☐	☐	☐	☐		