

# Ankle/Brachial Index (ABI) Report Form

Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_

Facility Performing

Patient Number: \_\_\_\_\_

Test: \_\_\_\_\_

### Indications:

- |                           |                          |                       |                          |
|---------------------------|--------------------------|-----------------------|--------------------------|
| Diabetes                  | <input type="checkbox"/> | High Fat Diet         | <input type="checkbox"/> |
| Hypertension              | <input type="checkbox"/> | Cigarette/Tobacco Use | <input type="checkbox"/> |
| Hyperlipidemia            | <input type="checkbox"/> | Sedentary             | <input type="checkbox"/> |
| Previous Vascular Surgery | <input type="checkbox"/> | Impotence             | <input type="checkbox"/> |
| Stroke (TIA)              | <input type="checkbox"/> | Obesity               | <input type="checkbox"/> |
| Heart Disease             | <input type="checkbox"/> |                       |                          |

### Current Symptoms:

- |   |                          |                    |                          |
|---|--------------------------|--------------------|--------------------------|
| Claudication  | <input type="checkbox"/> | Numbness, Tingling | <input type="checkbox"/> |
| (leg pain during walking<br>which disappears with rest) |                          | Cold Hands or Feet | <input type="checkbox"/> |
| Limb Hair Loss/Absence                                  | <input type="checkbox"/> | Extremity Weakness | <input type="checkbox"/> |
| Skin Color Changes                                      | <input type="checkbox"/> | Ulcerations        | <input type="checkbox"/> |
| Trophic Nails   | <input type="checkbox"/> |                    |                          |

### Notes:

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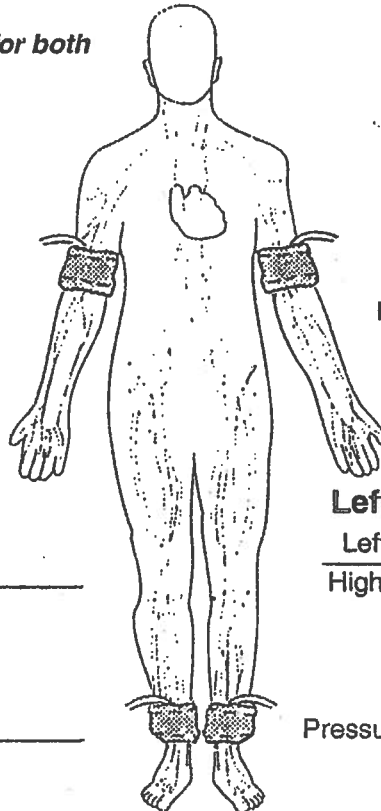
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## Ankle/Brachial Index (ABI) Results

*(Note: Use the higher arm pressure for both the left and right ABI calculations.)*



Pressure: \_\_\_\_\_

Pressure: \_\_\_\_\_

### Right ABI

$$\frac{\text{Right Ankle Pressure}}{\text{Highest Arm Pressure}} = \frac{\text{mmHg}}{\text{mmHg}} = \underline{\hspace{2cm}}$$

Pressure: \_\_\_\_\_

### Left ABI

$$\frac{\text{Left Ankle Pressure}}{\text{Highest Arm Pressure}} = \frac{\text{mmHg}}{\text{mmHg}} = \underline{\hspace{2cm}}$$

Pressure: \_\_\_\_\_

### Ankle/Brachial Index Interpretation\*

- 0.96 or Above - Generally Normal
- 0.81 - 0.95 - Mild Disease
- 0.51 - 0.81 - Moderate Disease
- 0.31 - 0.50 - Moderate to Severe Disease
- 0.30 or below - Severe Disease

\* Techniques in Noninvasive Vascular Diagnosis: Protocol and Procedures Guideline Manual, R.J. Daigle BA, RVT. Academy Medical Systems 1999. P. 134

$$\text{Example} = \frac{\text{Ankle Pressure}}{\text{Brachial Pressure}} = \frac{125 \text{ mmHg}}{114 \text{ mmHg}} = \underline{1.09}$$

**Attach report printouts to reverse side.**