

US TRANSCRANIAL DOPPLER TCD

DATE: ____/____/____

TECH: _____

ID #: _____

PATIENT NAME: _____ DOB: ____/____/____ SEX: M / F

UPDATED 8/13/2026

History: _____

HCT: _____ Stroke? _____ Head Diameter: _____

Results of Prior TCD: _____

RIGHT		LEFT
_____ TAMMV-CM/S	M1	_____ TAMMV-CM/S
Antegrade		Antegrade
_____ TAMMV-CM/S	MCA	_____ TAMMV-CM/S
Antegrade		Antegrade
_____ TAMMV-CM/S	BIF	_____ TAMMV-CM/S
Bi-directional		Bi-directional
_____ TAMMV-CM/S	ACA	_____ TAMMV-CM/S
Retrograde		Retrograde
_____ TAMMV-CM/S	ICA	_____ TAMMV-CM/S
Antegrade		Antegrade
_____ TAMMV-CM/S	PCA	_____ TAMMV-CM/S
Antegrade		Antegrade
_____ TAMMV-CM/S	TOB	_____ TAMMV-CM/S
Bi-directional		Bi-directional

BASILAR: _____ TAP – CM/S
Retrograde

Performed according to the S.T.O.P Protocol:

Velocities recorded CM per Second using the Time Averaged maximum Mean Velocity (TAMMV or TAMAX or TAP) Different US systems use different terminology.

INTERPRETATION: (Check one)

NORMAL: _____ No TAMMV Over 170 cm/s in any artery.

CONDITIONAL: _____ TAMMV > 170cm/s but < 200cm/s in 1 or more of M1, MCA, BIF or ICA = conditional 2A

TAMMV > 170cm/s om the PCA, TOB or BASILAR = conditional 2B

TAMMV > 170cm/s of the ACA = conditional 2C

ABNORMAL: _____ TAMMV > 200cm/s in 1 or more of M1, MCA, BIF, ICA

INADEQUATE: _____

COMMENTS: _____