AMMAIYAPPA HOSPITAL

142/5, PVTLOA Building, Tiruchengode Road,
Paramathi, Namakkal (Dt) - 637 207.

DIGITAL X-RAYS, ECHO, ULTRA SOUND

04 268 298 238 96 55 44 66 24

24/7 EMERGENCY SERVICES

4D ULTRA SOUND & COLOUR DOPPLER SCAN

REFERRAL FORM

Patient Name : Age / Sex :

Ph No : Date :

CLINICAL DIAGNOSIS .....

.....

Referring Doctor : .....

ULTRA SOUND

ABDOMEN

☐Complete ☐KUB

☐PELVIS / TRANSPERINEAL

☐PROSTATE/PERIANAL

GYNECOLOGY

☐Baseline Fertility Scan

☐Follicular Study (TVS)

☐Sonosalpingogram

SPECIAL

☐Neck, Thyroid

☐Breast

☐Scrotum - Testes

☐Neonatal Cranium

☐Orbit / Joints

ECHO

☐FETAL / Adult / Antenatal

COLOUR DOPPLER

OBSTETRICS

☐ Dating / First Trimestea Scan

☐ NT Scan (12 - 13 Weeks)

☐ Anomaly Scan (20 - 24 Weeks)

☐ Growth Scan

☐ AFI with Doppler

DOPPLER

☐ Carotid & Vertebral Aatery

☐ Renal Artery Doppler

☐ Portal Venous Doppler

☐ Upper Limb Artery R/L/Both

☐ Upper Limb Venous - R/L/Both

☐ Lower Limb Artery - R/L/Both

☐ Lower Limb Venous - R/L/Both

☐ Aorto Iliac Doppler

X-Ray

Dr.Signature