

MEDICAL ASSOCIATES OF NORTH GEORGIA
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DIAGNOSTIC ULTRASOUND EXAMS

EXAMS:

ABI	SOFT TISSUE_____
CAROTID	TESTICULAR
ECHO	THYROID
RENAL	VENOUS DOPPLER

PELVIC ENDOVAGINAL / TRANS-VAGINAL

*If on the OUTSIDE of the pelvis, use the OTHER pelvic ultrasound instructions.

INSTRUCTIONS: NONE
