1/per day u 400/4w [10 per d u 2 to 3yrs]

DEPARTMENT OF RADIOLOGY

NAME:	IP.NO:
AGE :	SEX :
DATE :	

USG THYROID

RIGHT LOBE
- Size measures~
- Echotexture/Echogenicity –
- Vascularity –
- Focal lesions –

LEFT LOBE
- Size measures~
- Echotexture/Echogenicity –
- Vascularity –
- Focal lesions –

ISTHMUS –
Neck vessels –
Neck nodes –

Bilateral submandibular glands/parotid glands

IMPRESSION

Signature