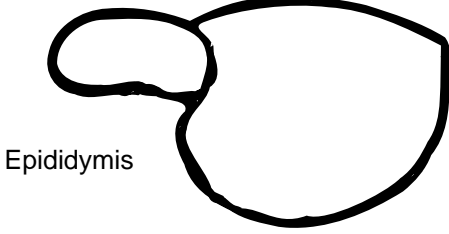
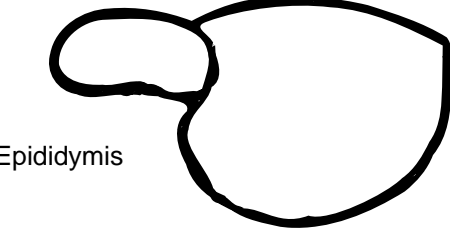


# Scrotal Ultrasound

Patient Name	Date of Exam
History	
<p><b>Right</b></p> <p style="text-align: right;">Testicle</p>  <p>Epididymis</p>	<p><b>Left</b></p> <p style="text-align: right;">Testicle</p>  <p>Epididymis</p>
<p>Teste</p> <p>_____ x _____ x _____ cm</p>	<p>Teste</p> <p>_____ x _____ x _____ cm</p>
<p>Epididymis</p> <p>_____ x _____ x _____ cm</p>	<p>Epididymis</p> <p>_____ x _____ x _____ cm</p>
Sonographer	