

McLaren Print System Order

Order No: 77213
Order Date: 2023-05-10
User: Deb House
Phone: 989-269-9521


Ship Location: McLaren Thumb Attn Deb House, Imaging
1100 S VAN DYKE RD
BAD AXE, MI 48413

Forms

Quantity: 500
Paragon Dept No: 27290
Dept Name: Ultrasound
Company Number: 530

Order Total Price: 0.00

Item Number: 026.103
Item Description: Carotid Doppler Eval
Revision Date: 10/2008
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Poster:
Misc Info: SS; BLACK; BOND PAPER

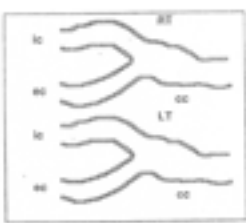


CAROTID DOPPLER EVALUATION

Name _____ Age _____ Date _____

Doctor _____ Reason for Exam _____

Comments _____



RIGHT:				LEFT:			
CCA	CCA	CCA	CCA	CCA	CCA	CCA	CCA
_____	_____	_____	_____	_____	_____	_____	_____
BCAA	BCAA	BCAA	BCAA	BCAA	BCAA	BCAA	BCAA
_____	_____	_____	_____	_____	_____	_____	_____
ICA	ICA	ICA	ICA	ICA	ICA	ICA	ICA
_____	_____	_____	_____	_____	_____	_____	_____
ECA	ECA	ECA	ECA	ECA	ECA	ECA	ECA
_____	_____	_____	_____	_____	_____	_____	_____
VA	VA	RATIO	RATIO	VA	VA	RATIO	RATIO
_____	_____	_____	_____	_____	_____	_____	_____

026.103.10-08