

BAHR EL GHAZAL CLINIC

Your Health, Our Priority

Phone: +211 91 762 3881 | +211 92 220 0691 | Email: bahr.ghazal.clinic@gmail.com

ULTRASOUND EXAMINATION REPORT

Examination Information

Ultrasound Order: BGC-US2

Requested Date: 2025-08-14

Patient ID: BGC2

Report Date: 2025-08-14

Examination Type: Abdominal Ultrasound

Image Quality: Good

Priority: Routine

Status: Normal

Findings

No findings recorded

Impression

No impression recorded

Sonographer Name & Signature

Sonographer: _____

Signature: _____

Date: 2025-08-14