

West Bengal Form No. 815

Plate No. ....

Register No. ....

# R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

RG 18091240

Report / Treatment is required of

Name..... Anup Gantait

Age..... 27y

Sex..... (M)

Address.....

Ward..... C20BS

No. of Bed / Cabin..... (33)

Physician / Surgeon..... III(S)

Paying / Non Paying .....

Brief history of case

Chronic Calcific Pancreatitis

Clinical Diagnosis

USG KPA →

CBD = 4.4mm

Pancreas = atrophic MPD is irregularly dilated & contains multiple calculi. (14mm)

Particulars point to be Investigated

o MRCP

Instruction

Signature.....

[Signature]

Date..... 23/11/18

**REPORT**

[Signature]  
PGT-V III(S)