

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name..... Babulata Samant ✓ 002975 R418078961
Age..... 48y Sex..... M

Address.....

Physician / Surgeon..... 1(4) Ward..... LAN No. of Bed / Cabin..... 86

Paying / Non Paying.....

Brief history of case ROG pain x epigastric pain x 25 days

Clinical Diagnosis n/w vomiting, nausea

Particulars point to be Investigated USG (27/11/18) - GB stones @
CBD +3 mm dilated

Instruction multiple calculi

Date..... 28/11/18 MRCP to look for Signature..... R. Samant

REPORT

GB stones, wall thickening
CBD diameter, stones, IHBR, EHBR status.

- Notes:
- (1) This form should, except in urgent cases, be signed by the Visiting Staff.
 - (2) A note should, in all fracture cases, be made as to whether the splints may be removed.
 - (3) The time at which a Bismuth meal has been given should be noted.
 - (4) In the M. C. H. this form should be sent to the X-Ray Department at 8-30 a.m. for appointment of time.