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कर्मचारी राज्य बीमा निगम अस्पताल, पीण्या, बेंगलूरु - 560 022.

EMPLOYEES' STATE INSURANCE CORPORATION

HOSPITAL, PEENYA, BENGALURU - 560 022.

(Under Ministry of Labour & Employment, Govt. of India)

Sample-3

### CT AND MRI CENTRE

Date : .....

Name : ..... Age ..... Sex F/M

Ref. Physician .....

Insurance No. .... IP/OP No. .... Ward/OPD .....

### EXAM REQUESTED

C.T. Scan

MRI

Clinical History :

Provisional Diagnosis :

Any Special Instruction :

Is the patient Pregnant : ☐ Yes ☐ No

Request No. :

Radiology - Office Use

| Request/Examination           | Films Status                    | Reporting / Typing / Dispatching |
|-------------------------------|---------------------------------|----------------------------------|
| Request received              | Films Printed                   | Reported by Radiologist          |
| Appointment for Examination   | Wet Film Dispatched             | Report Typing                    |
| Patient Received in Radiology | Film Kept for Reporting         | Report issued to Dispatch Desk   |
| Examination Performed         | Return of wet film to radiology | Report issued to Ward            |

Please bring all old records including Lab reports