



\_\_\_\_\_ DIVISION

**REPORT ON X-RAY OF CAECUM AND COLON (BARIUM ENEMA)**

Proposal No. \_\_\_\_\_ Name of the Life to be Assured \_\_\_\_\_ Age \_\_\_\_\_ Years

**(1) CAECUM AND COLON ( BARIUM ENEMA):**

Size and length \_\_\_\_\_

Position \_\_\_\_\_

Mobility \_\_\_\_\_

Contours \_\_\_\_\_

Filling Defect \_\_\_\_\_

Mucosal Pattern \_\_\_\_\_

Peristalsis \_\_\_\_\_

Naustra \_\_\_\_\_

Tenderness \_\_\_\_\_

Any obstruction \_\_\_\_\_

Any palpable mass or diverticulosis \_\_\_\_\_

Any other abnormality \_\_\_\_\_

**CONCLUSIONS:**

Dated at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
**Signature of the Life to be Assured**

\_\_\_\_\_  
**Signature of the Introducer:**  
**(Agent / Development Officer)**  
**Name :** \_\_\_\_\_  
**Code No.** \_\_\_\_\_

**I Certify that the proposer / LA has put his /her  
Signature alongside in my presence**

\_\_\_\_\_  
**Signature of the Radiologist**  
**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Qualification:** \_\_\_\_\_  
**Code No:** \_\_\_\_\_