REPORT ON INTRAVENOUS – PYELOGRAPHY

N.B.: (1) TAKE FOUR PYELOGRAMS AS FOLLOWS:
   (a) Pyelograms – Kidneys & Ureters – 5 Minutes
   (b) Pyelograms – Kidneys & Ureters – 15 Minutes
   (c) Pyelograms – Kidneys & Ureters – 30 Minutes
   (d) Pyelograms – Bladder – 40 Minutes

   (2) Before doing intravenous pyelography plain skiagrams of the kidneys, ureters, bladder and prostate should be taken, unless satisfactory skiagrams taken previously within 3 months of the date of examination are available.

Proposal No. _______ Name of the Life to be Assured ___________________________ Age ________ Years

<table>
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<tr>
<th>(1)</th>
<th>KIDNEYS:</th>
<th>Function</th>
<th>Outlines</th>
<th>Size</th>
<th>Position</th>
<th>Calyces</th>
<th>Any other abnormality</th>
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<th>(2)</th>
<th>URETERS:</th>
<th>Position</th>
<th>Obstruction</th>
<th>Any other abnormality</th>
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<th>(3)</th>
<th>BLADDER:</th>
<th>Outlines</th>
<th>Filling Defect</th>
<th>Any other abnormality</th>
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<th>(4)</th>
<th>CONCLUSIONS:</th>
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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. __________________________