PORT MUENT SHEET

(Consent forms to be affixed to back of sheet)

D.O.B.

AFFIX PATIENT'S IDENTIFICATION LABEL NERE

ROYAL BELFAST
HOSPITAL FOR
SICK CHILDREN
BELFAST BT12 6BE
Form No. RBHSC102

FULL NAME

HOSPITAL NUMBER

HOSPITAL NUMBER

WARD/CLINIC
X-RAY USE

Contrast study of gastrostomy - Gastromiro contrastwas injected through the tube and it outlined the stomach normally. No leakage of contrast. The stomach empties normally.

18.10.95 Dr A Shabani.

15

Date Signature RADIOLOGICAL REPORT