

# Main Radiology Ojha Campus

**111 Suparco Rd, Gulzar-e-Hijri Gulzar E Hijri Scheme 33, Karachi, Karachi City, Sindh**

**Appointment:** Ojha OPD: +92 21 111 362 273 (8:30 am - 12:00 am)

**Email:** dir.radiology@duhs.edu.pk

## Timings:

MRI, CT scan and X-ray: 24/7

Others: Morning Shift

## Diagnostic Facilities Available:

S. No.	Procedure Name
1	DIR ASSESSMENT
2	FOUR NEEDLE BRACKETING
3	HYSTERSONOGRAPHY
4	LIGA CLIP PLACEMENT FOR BREAST MASSES BEFORE CHEMOTHERAPY (PER LESION)
5	ONE NEEDLE BRACKETING
6	PENILE DOPPLER
7	THREE NEEDLE BRACKETING
8	TWO NEEDLE BRACKETING
9	ULTRASOUND ABDOMEN LOWER OR PELVIS
10	ULTRASOUND ABDOMEN UPPER
11	ULTRASOUND ABDOMEN WHOLE
12	ULTRASOUND AXILLA
13	ULTRASOUND BRAIN
14	ULTRASOUND BREAST BILATERAL
15	ULTRASOUND BREAST UNILATERAL
16	ULTRASOUND CHEST
17	ULTRASOUND DOPPLER CAROTID BILATERAL
18	ULTRASOUND DOPPLER OBSTETRIC
19	ULTRASOUND DOPPLER PERIPHERAL ARTERIAL AND VENOUS BILATERAL
20	ULTRASOUND DOPPLER PERIPHERAL ARTERIAL AND VENOUS UNILATERAL
21	ULTRASOUND DOPPLER PERIPHERAL ARTERIAL BILATERAL
22	ULTRASOUND DOPPLER PERIPHERAL ARTERIAL UNILATERAL
23	ULTRASOUND DOPPLER VENOUS (DVT) BILATERAL
24	ULTRASOUND DOPPLER VENOUS (DVT) UNILATERAL

25	ULTRASOUND DOPPLER VENOUS VARICOSE BILATERAL
26	ULTRASOUND DOPPLER VENOUS VARICOSE UNILATERAL
27	ULTRASOUND DOPPLER PERIPHERAL VENOUS BILATERAL
28	ULTRASOUND DOPPLER PERIPHERAL VENOUS UNILATERAL
29	ULTRASOUND DOPPLER PORTAL VENOUS SYSTEM
30	ULTRASOUND DOPPLER RENAL VESSELS
31	ULTRASOUND EYE UNILATERAL
32	ULTRASOUND FAST(FOCAL ASSESSMENT SONOGRAPHY FOR TRAUMA)
33	ULTRASOUND FOETAL ANOMALY SCAN
34	ULTRASOUND FOETAL DOPPLER
35	ULTRASOUND FOETAL WELL BEING (BIOPHYSICAL PROFILE)
36	ULTRASOUND FOETAL WELL BEING (FWB)
37	ULTRASOUND GUIDED ABSCESS DRAINAGE
38	ULTRASOUND GUIDED PLACEMENT OF PIGTAIL DRAINAGE CATHETER (EXC. SET)
39	ULTRASOUND GUIDED PLEURAL ASCITIC TAP DIAGNOSTIC
40	ULTRASOUND GUIDED PLEURAL ASCITIC TAP THERAPEUTIC
41	ULTRASOUND GUIDED RENAL HEPATIC BIOPSY
42	ULTRASOUND HEAD
43	ULTRASOUND HIP
44	ULTRASOUND JOINT
45	ULTRASOUND KUB U/S

S. No.	Procedure Name
46	ULTRASOUND LIVER AND GALLBLADDER
47	ULTRASOUND NECK(THYROID,PARATHYROID,LYMPH NODES)
48	ULTRASOUND PELVIS FOLLICULAR MONITORING TRANSABDOMINAL
49	ULTRASOUND PELVIS(TRANSVAGINAL)
50	ULTRASOUND PROSTATE TRUS
51	ULTRASOUND PROSTATE WITH PRE AND POST VOID
52	ULTRASOUND SINGLE ORGAN
53	ULTRASOUND TESTES
54	ULTRASOUND GUIDED BIOPSY (ANY)
55	ULTRASOUND LIVER DOPPLER
56	ULTRASOUND PELVIS
57	ULTRASOUND PELVIS TVS FOR FOLLICULAR MONITORING SINGLE ONLY

58	ULTRASOUND PRE POST VOID
59	ULTRASOUND TRUE CUT BIOPSY
60	US GUIDED BREAST NEEDLE LOCALIZATION
61	VENOGRAPHY FOR BOTH LIMB
62	VENOGRAPHY FOR ONE LIMB
63	MRI NECK WITH & WITHOUT CONTRAST
64	MRI ANESTHESIA CHARGES
65	MRI BRAIN & ORBITS WITH & WITHOUT CONTRAST
66	MRI BRAIN & ORBITS WITHOUT CONTRAST
67	MRI BRAIN FOR IAC WITH & WITHOUT CONTRAST
68	MRI BRAIN FOR PITUITARY GLAND PLAIN & CONTRAST
69	MRI BRAIN FOR SEIZURE PROTOCOL PLAIN
70	MRI BRAIN FOR SEIZURE PROTOCOL WITH CONTRAST
71	MRI CERVICAL SPINE WITHOUT CONTRAST
72	MRI FOOT SINGLE WITHOUT CONTRAST
73	MRI HEAD / BRAIN WITH & WITHOUT CONTRAST
74	MRI MRV BRAIN WITHOUT CONTRAST
75	MRI SECOND OPINION ON MRI PROCEDURE (FOR REPORTING)
76	MRI 2ND OPINION
77	MRI ABDOMEN WITH & WITHOUT CONTRAST
78	MRI ABDOMEN WITHOUT CONTRAST
79	MRI ANKLE JOINT SINGLE WITH & WITHOUT CONTRAST
80	MRI ANKLE JOINT SINGLE WITHOUT CONTRAST
81	MRI BRACHIAL PLEXUS WITH & WITHOUT CONTRAST
82	MRI BRAIN (SCREENING)
83	MRI BRAIN SEIZURE PROTOCOL WITHOUT CONTRAST
84	MRI BRAIN SPECTROSCOPY
85	MRI BRAIN STROKE PROTOCOL WITHOUT CONTRAST
86	MRI BREAST WITH & WITHOUT CONTRAST
87	MRI CERVICAL SPINE (SCREENING)
88	MRI CERVICAL SPINE WITH & WITHOUT CONTRAST
89	MRI CERVICO DORSAL SPINE SCREENING
90	MRI CERVICO DORSAL SPINE WITH & WITHOUT CONTRAST
91	MRI CERVICO DORSAL WITHOUT CONTRAST
92	MRI DORSAL SPINE SCREENING
93	MRI DORSAL SPINE WITH & WITHOUT CONTRAST

S. No.	Procedure Name
94	MRI DORSAL SPINE WITHOUT CONTRAST

95	MRI DORSOLUMBAR SPINE WITH & WITHOUT CONTRAST
96	MRI DORSOLUMBAR SPINE WITHOUT CONTRAST
97	MRI DORSOLUMBAR SPINE SCREENING
98	MRI ELBOW (LEFT)WITH & WITHOUT CONTRAST
99	MRI ELBOW SINGLE WITH & WITHOUT CONTRAST
100	MRI ELBOW SINGLE WITHOUT CONTRAST
101	MRI FACE WITH & WITHOUT CONTRAST
102	MRI FACE WITHOUT CONTRAST
103	MRI FEMUR (LEFT) WITH & WITHOUT CONTRAST
104	MRI FEMUR SINGLE WITH & WITHOUT CONTRAST
105	MRI FEMUR SINGLE WITH CONTRAST
106	MRI FOOT PLAIN (WITHOUT CONTRAST)
107	MRI FOOT SINGLE WITH & WITHOUT CONTRAST
108	MRI FOREARM SINGLE WITH & WITHOUT CONTRAST
109	MRI HAND SINGLE WITH & WITHOUT CONTRAST
110	MRI HAND SINGLE WITHOUT CONTRAST
111	MRI HEAD / BRAIN WITH MRA CONTRAST
112	MRI HEAD / BRAIN WITH MRA WITHOUT CONTRAST
113	MRI HEAD / BRAIN WITHOUT CONTRAST
114	MRI HIP (LEFT) WITHOUT CONTRAST
115	MRI HIP SINGLE WITH & WITHOUT CONTRAST
116	MRI HIP SINGLE WITHOUT CONTRAST
117	MRI HUMERUS SINGLE WITH & WITHOUT CONTRAST
118	MRI KNEE SINGLE WITH & WITHOUT CONTRAST
119	MRI KNEE SINGLE WITHOUT CONTRAST
120	MRI LEFT KNEE WITHOUT CONTRAST
121	MRI LUMBAR SPINE (SCREENING)
122	MRI LUMBAR PLEXUS WITH & WITHOUT CONTRAST
123	MRI LUMBOSACRAL SPINE WITH & WITHOUT CONTRAST
124	MRI LUMBOSACRAL SPINE WITHOUT CONTRAST
125	MRI LUMBOSACRAL SPINE WITHOUT CONTRAST WITH MYELOGRAM
126	MRI MR CONTRAST (ONLY)
127	MRI MRA & MRV BRAIN WITH & WITHOUT CONTRAST
128	MRI MRA FOR BRAIN
129	MRI MRA RENAL ANGIO
130	MRI MRCP
131	MRI MRV BRAIN WITH AND WITHOUT CONTRAST
132	MRI NECK WITH CONTRAST
133	MRI NECK WITHOUT CONTRAST
134	MRI PELVIS WITH & WITHOUT CONTRAST
135	MRI PELVIS WITHOUT CONTRAST

136	MRI PNS WITH & WITHOUT CONTRAST
137	MRI RIGHT KNEE WITHOUT CONTRAST
138	MRI S.I.JOINT WITH AND WITHOUT CONTRAST
139	MRI SACRO ILIAC JOINT WITHOUT CONTRAST (PLAIN STUDY)
140	MRI SACROILIAC JOINT WITH & WITHOUT CONTRAST
141	MRI SHOULDER SINGLE PLAIN
142	MRI SHOULDER SINGLE WITH & WITHOUT CONTRAST
143	MRI SHOULDER SINGLE WITHOUT CONTRAST

S. No.	Procedure Name
144	MRI SINGLE SEQUENCE MRI
145	MRI THORACIC SPINE (SCREENING)
146	MRI THORAX WITH & WITHOUT CONTRAST
147	MRI TIBIA SINGLE WITH & WITHOUT CONTRAST
148	MRI TIBIA SINGLE WITHOUT CONTRAST
149	MRI WHOLE SPINE SCREENING
150	MRI WRIST JOINT SINGLE WITH & WITHOUT CONTRAST
151	MRI WRIST SINGLE JOINT WITHOUT CONTRAST
152	MRI BRAIN STROKE PROTOCOL WITH & WITHOUT CONTRAST
153	MRI MR FILM (ADDITIONAL)
154	MRI MRA PER REGION CONTRAST
155	MRI BRAIN FOR COCHLEAR IMPLANT PLAIN WITH CD
156	MRI BRAIN DTI
157	MRI BRAIN PERFUSION
158	MRA BRAIN ONLY
159	MR SPECTROSCOPY EVALUATION
160	MR SPECTROSCOPY WITH CONTRAST
161	MRI BRACHIAL PLEXUS WITHOUT CONTRAST
162	MRI SINGLE REGION WITH CONTRAST
163	MRI SINGLE REGION WITHOUT CONTRAST
164	MRI HEAD SKULL BASE WITH AND WITHOUT CONTRAST
165	MRI ABDOMINAL WALL WITH CONTRAST
166	MRI ABDOMINAL WALL WITHOUT CONTRAST
167	DWI ONLY
168	MRI THORACIC INLET WITHOUT CONTRAST
169	MRI THORACIC INLET WITH CONTRAST
170	MRI SCAPULA WITHOUT CONTRAST
171	MRI SCAPULA WITH AND WITHOUT CONTRAST
172	MRI FOR CSF RHINORRHEA WITHOUT CONTRAST

173	MRI FOR CSF RHINORRHEA WITH AND WITHOUT CONTRAST
174	MRI TMJ WITHOUT CONTRAST
175	MRI TMJ WITH AND WITHOUT CONTRAST
176	MRI BRAIN IAC WITHOUT CONTRAST
177	MRI STERNOCLAVICULAR WITHOUT CONTRAST
178	MRI STERNOCLAVICULAR WITH AND WITHOUT CONTRAST
179	MRI BRAIN MS PROTOCOL WITHOUT CONTRAST
180	MRI BRAIN MS PROTOCOL WITH AND WITHOUT CONTRAST
181	MRI ADRENAL GLAND WITHOUT CONTRAST
182	MRI ADRENAL GLAND WITH AND WITHOUT CONTRAST
183	MRI FOR PELVIS (PLACENTA) WITHOUT CONTRAST
184	MRI UROGRAPHY WITHOUT CONTRAST
185	MRI UROGRAPHY WITH AND WITHOUT CONTRAST
186	MRI RENAL ANGIO WITHOUT CONTRAST
187	MRI PROSTATE WITH AND WITHOUT CONTRAST
188	MRI SACROCOCCYGEAL REGION WITHOUT CONTRAST
189	MRI SACROCOCCYGEAL REGION WITH AND WITHOUT CONTRAST
190	MRI FOR NEURONAVIGATION WITHOUT CONTRAST (WITH CD)
191	MRI FOR NEURONAVIGATION WITH CONTRAST (WITH CD)
192	MRI CERVICAL SPINE WITHOUT CONTRAST (EXTENSION AND FLEXION DYNAMIC STUDY)

S. No.	Procedure Name
193	MRI CERVICAL SPINE (EXTENSION AND FLEXION DYNAMIC STUDY) WITH AND WITHOUT CONTRAST
194	MRI BRAIN ONLY WITHOUT CONTRAST
195	MRI MRA AORTA WITHOUT CONTRAST
196	MRI BRAIN ONLY WITH CONTRAST
197	MRI THORACIC AORTA WITH AND WITHOUT CONTRAST
198	MRI ABDOMINAL AORTA WITH AND WITHOUT CONTRAST
199	CSF FLOW STUDY
200	MRI BRAIN WITHOUT CONTRAST FOR GAMMA KNIFE
201	MRI BRAIN WITH AND WITH AND WITHOUT CONTRAST FOR GAMMA KNIFE
202	MRI PELVIS WITHOUT CONTRAST FOR MSK PROTOCOL
203	MRI PELVIS WITH AND WITHOUT CONTRAST FOR MSK PROTOCOL
204	MRI FEMUR/ THIGH WITHOUT CONTRAST
205	MRI FOREARM WITHOUT CONTRAST
206	MRI BRAIN AND PNS WITHOUT CONTRAST

207	CARDIAC CT FOR CALCIUM SCORING
208	CORONARY CT ANGIOGRAPHY
209	CT FACT
210	CT PYLO - CT KUB
211	CT ABDOMEN & PELVIS WITH CONTRAST
212	CT ABDOMEN & PELVIS WITH & WITHOUT CONTRAST (TRIPHASIC)
213	CT ABDOMEN & PELVIS WITHOUT CONTRAST
214	CT ADD.STUDY AREA OF INTEREST
215	CT ADDITIONAL PIGTAIL CATHETER
216	CT ANESTHESIA CHARGES
217	CT ANGIO PERIPHERAL
218	CT ANGIOGRAPHY
219	CT ANGIO AORTA
220	CT ASPIRATION ADDL. TO CT
221	CT BRONCHOSCOPY
222	CT CAROTID ANGIOGRAPHY
223	CT CEREBRAL ANGIOGRAPHY
224	CT CHEST & ABDOMEN (TRIPHASIC)
225	CT CHEST & ABDOMEN PELVIS
226	CT CHEST HIGH RESOLUTION (HRCT)
227	CT CHEST WITH & WITHOUT CONTRAST
228	CT CHEST WITH CONTRAST
229	CT CHEST WITHOUT CONTRAST
230	CT COLONOSCOPY
231	CT CORE BIOPSY
232	CT CTA RENAL ARTERIES
233	CT EXTREMITIES WITH CONTRAST
234	CT EXTREMITIES WITHOUT CONTRAST
235	CT EXTREMITIES WITH 3D
236	CT FACIAL BONE WITH 3D
237	CT FACIAL REGION WITH & WITHOUT CONTRAST
238	CT FACIAL REGION WITH CONTRAST
239	CT FACIAL REGION WITHOUT CONTRAST
240	CT FILM (ADDITIONAL)

S. No.	Procedure Name
241	CT GUIDED DRAIN PLACEMENT
242	CT GUIDED PROCEDURE & BIOPSY
243	CT HEAD & NECK WITH CONTRAST

244	CT HEAD / BRAIN WITHOUT CONTRAST
245	CT HEAD / BRAIN WITH & WITHOUT CONTRAST
246	CT HEAD WITHOUT CONTRAST/ TRAUMA
247	CT HEAD, NECK AND CHEST STAGING
248	CT LIVER DONOR TRIPHASIC
249	CT NECK WITH CONTRAST
250	CT NECK WITHOUT CONTRAST
251	CT NECK,CHEST & ABDOMEN
252	CT NON IONIC CONTRAST 100 ML
253	CT NON IONIC CONTRAST 50 ML
254	CT ORBITS WITH & WITHOUT CONTRAST
255	CT ORBITS WITHOUT CONTRAST
256	CT PANCREATIC PROTOCOL
257	CT PARANASAL SINUSES LTD.STUDY
258	CT PARANASAL SINUSES PLAIN & CONTRAST
259	CT PARANASAL SINUSES WITHOUT CONTRAST
260	CT PELVIMETRY
261	CT PELVIS WITH & WITHOUT CONTRAST
262	CT PELVIS WITH CONTRAST
263	CT PELVIS WITHOUT CONTRAST
264	CT PULMONARY ANGIOGRAPHY
265	CT SACROILIAC JOINTS
266	CT SECOND OPINION ON CT PROCEDURE
267	CT SPINE WITH & WITHOUT CONTRAST
268	CT SPINE WITH 3D
269	CT SPINE WITH MYELOGRAM
270	CT SPINE WITHOUT CONTRAST
271	CT TEMPORAL BONE / IAC WITH & WITHOUT CONTRAST
272	CT TEMPORAL BONE WITHOUT CONTRAST
273	CT TRAUMA BONE WINDOW (ADDITIONAL)
274	CT TRIPHASIC (ADDITIONAL)
275	CT UROGRAM
276	CT NECK WITH AND WITHOUT CONTRAST
277	LIMITED STUDY CT CHEST FOR COVID
278	CT ANGIO RIGHT ARM
279	CT ANGIO LEFT ARM
280	CT ANGIO ABDOMEN
281	CT CISTERNOGRAM
282	CT BRAIN PLAN 3D
283	CT GUIDED BIOPSY PLANNING
284	CT BRAIN WITH ORBIT PLAIN

285	CT BRAIN WITH ORBIT PLAIN & CONTRAST
286	CT ABDOMEN MESENTERIC ANGIOGRAPHY
287	CT ABDOMEN GI BLEED PROTOCOL ANGIOGRAPHY
288	CT CERVICAL SPINE PLAIN
289	CT CERVICAL SPINE PLAIN & CONTRAST
290	CT DORSAL SPINE PLAIN

S. No.	Procedure Name
291	CT DORSAL SPINE PLAIN & CONTRAST
292	CT LUMBAR SPINE PLAIN
293	CT LUMBAR SPINE PLAIN & CONTRAST
294	CT CERVICO-DORSAL SPINE PLAIN
295	CT CERVICO-DORSAL SPINE PLAIN & CONTRAST
296	CT DORSO-LUMBAR SPINE PLAIN
297	CT DORSO-LUMBAR SPINE PLAIN & CONTRAST
298	CT WHOLE SPINE PLAIN
299	CT WHOLE SPINE PLAIN & CONTRAST
300	CT ADDITIONAL CHARGES
301	CT SHOULDER JOINT (RIGHT) PLAIN
302	CT SHOULDER JOINT (LEFT) PLAIN
303	CT SHOULDER JOINT (RIGHT) PLAIN & CONTRAST
304	CT SHOULDER JOINT (LEFT) PLAIN & CONTRAST
305	CT ELBOW JOINT (RIGHT) PLAIN
306	CT ELBOW JOINT (LEFT) PLAIN
307	CT ELBOW JOINT (RIGHT) PLAIN & CONTRAST
308	CT ELBOW JOINT (LEFT) PLAIN & CONTRAST
309	CT WRIST JOINT (RIGHT) PLAIN
310	CT WRIST JOINT (LEFT) PLAIN
311	CT WRIST JOINT (RIGHT) PLAIN & CONTRAST
312	CT WRIST JOINT (LEFT) PLAIN & CONTRAST
313	CT HAND (RIGHT) PLAIN
314	CT HAND (LEFT) PLAIN
315	CT HAND (RIGHT) PLAIN & CONTRAST
316	CT HAND (LEFT) PLAIN & CONTRAST
317	CT HUMERUS (RIGHT) PLAIN
318	CT HUMERUS (LEFT) PLAIN
319	CT HUMERUS (RIGHT) PLAIN & CONTRAST
320	CT HUMERUS (LEFT) PLAIN & CONTRAST
321	CT FOREARM (RIGHT) PLAIN

322	CT FOREARM (LEFT) PLAIN
323	CT FOREARM (RIGHT) PLAIN & CONTRAST
324	CT FOREARM (LEFT) PLAIN & CONTRAST
325	CT FEMUR (RIGHT) PLAIN
326	CT FEMUR (LEFT) PLAIN
327	CT FEMUR (RIGHT) PLAIN & CONTRAST
328	CT FEMUR (LEFT) PLAIN & CONTRAST
329	CT KNEE JOINT (RIGHT) PLAIN
330	CT KNEE JOINT (LEFT) PLAIN
331	CT KNEE JOINT (RIGHT) PLAIN & CONTRAST
332	CT KNEE JOINT (LEFT) PLAIN & CONTRAST
333	CT TIBIA FIBULA (RIGHT) PLAIN
334	CT TIBIA FIBULA (LEFT) PLAIN
335	CT TIBIA FIBULA (RIGHT) PLAIN & CONTRAST
336	CT TIBIA FIBULA (LEFT) PLAIN & CONTRAST
337	CT ANKLE JOINT (RIGHT) PLAIN
338	CT ANKLE JOINT (LEFT) PLAIN
339	CT ANKLE JOINT (RIGHT) PLAIN & CONTRAST
340	CT ANKLE JOINT (LEFT) PLAIN & CONTRAST

S. No.	Procedure Name
341	CT FOOT (RIGHT) PLAIN
342	CT FOOT (LEFT) PLAIN
343	CT FOOT (RIGHT) PLAIN & CONTRAST
344	CT FOOT (LEFT) PLAIN & CONTRAST
345	PORTABLE SERVICE CHARGES IN ADDITION TO NORMAL CHARGES
346	STUDY COPY ON CD.
347	XRAY ABDOMEN (AP/LAT)
348	XRAY ABDOMEN (ERECT & SUPINE)
349	XRAY ABDOMEN (KUB)
350	XRAY ABDOMEN PORTABLE
351	XRAY ABDOMEN SUPINE
352	XRAY ACROMIOCLAVICULAR JOINTS BOTH (AP)
353	XRAY ADENOID
354	XRAY ALAR VIEW RT HIP JT
355	XRAY ALAR/OBTURATOR VIEW
356	XRAY ANIMAL AP
357	XRAY ANIMAL AP /LAT
358	XRAY ANKLE JOINT BOTH (AP)

359	XRAY ANKLE JOINT BOTH (OBL)
360	XRAY ANKLE JOINT BOTH (AP/OBL)
361	XRAY ANKLE JOINT BOTH (LAT)
362	XRAY ANKLE JOINT BOTH AP/ LAT)
363	XRAY ANKLE JOINT LEFT (AP)
364	XRAY ANKLE JOINT LEFT (AP/LAT)
365	XRAY ANKLE JOINT LEFT (AP/OBL)
366	XRAY ANKLE JOINT LEFT (LAT)
367	XRAY ANKLE JOINT LEFT (OBL)
368	XRAY ANKLE JOINT LEFT MORTISE VIEW
369	XRAY ANKLE JOINT RIGHT (AP)
370	XRAY ANKLE JOINT RIGHT (AP/LAT)
371	XRAY ANKLE JOINT RIGHT (AP/OBL)
372	XRAY ANKLE JOINT RIGHT (LAT)
373	XRAY ANKLE JOINT RIGHT (OBL)
374	XRAY ANKLE JOINT RIGHT MORTISE VIEW
375	XRAY ANTEGRADE PYELOGRAM
376	XRAY BABYGRAM X RAY
377	XRAY BLADDER AP/OBL
378	XRAY BLADDER X RAY
379	XRAY CALCANEUS LEFT AXIAL VIEW
380	XRAY CALCANEUS RIGHT AXIAL VIEW
381	XRAY CHEST
382	XRAY CHEST PORTABLE
383	XRAY CHEST (AP)
384	XRAY CHEST (PA)
385	XRAY CHEST (PA/ AP CAL)
386	XRAY CHEST (PA/ AP)
387	XRAY CHEST (PA/ PENETRATED)
388	XRAY CHEST APICAL
389	XRAY CHEST BOTH OBLIQUE
390	XRAY CHEST LEFT (LAT)

S. No.	Procedure Name
391	XRAY CHEST LEFT DECUBITUS
392	XRAY CHEST LEFT OBLIQUE
393	XRAY CHEST LORDOTIC
394	XRAY CHEST RIGHT (LAT)
395	XRAY CHEST RIGHT DECUBITUS

396	XRAY CHEST RIGHT OBLIQUE
397	XRAY CHRONOGRAM
398	XRAY CLAVICLE BOTH (AP)
399	XRAY CLAVICLE LEFT (AP)
400	XRAY CLAVICLE RIGHT (AP)
401	XRAY COCCYX (AP)
402	XRAY COCCYX (AP/LAT)
403	XRAY COCCYX (LAT)
404	XRAY D 12 + L 1 JUNCTION (AP / LAT)
405	XRAY DORSOLUMBAR JUNCTION (AP / LAT)
406	XRAY ELBOW JOINT RIGHT (AP/ LAT)
407	XRAY ELBOW LEFT ( AP)
408	XRAY ELBOW LEFT (LAT)
409	XRAY ELBOW LEFT (OBL)
410	XRAY ELBOW RIGHT (AP)
411	XRAY ELBOW RIGHT (LAT)
412	XRAY ELBOW RIGHT (OBL)
413	XRAY FACE (AP)
414	XRAY FACE (AP/LAT)
415	XRAY FACE (LAT)
416	XRAY FACIAL BONE (SINGLE VIEW)
417	XRAY FEMUR (THIGH) LEFT (AP)
418	XRAY FEMUR (THIGH) LEFT (AP/LAT)
419	XRAY FEMUR (THIGH) LEFT (AP/OBL)
420	XRAY FEMUR (THIGH) LEFT (LAT)
421	XRAY FEMUR (THIGH) LEFT (OBL)
422	XRAY FEMUR (THIGH) RIGHT (AP & LAT)
423	XRAY FEMUR (THIGH) RIGHT (AP)
424	XRAY FEMUR (THIGH) RIGHT (AP/OBL)
425	XRAY FEMUR (THIGH) RIGHT (LAT)
426	XRAY FEMUR (THIGH) RIGHT (OBL)
427	XRAY FEMUR BOTH (AP/LAT)
428	XRAY FEMUR BOTH (LAT)
429	XRAY FINGER LEFT (AP)
430	XRAY FINGER LEFT (AP/LAT)
431	XRAY FINGER RIGHT (AP)
432	XRAY FINGER RIGHT (AP/LAT)
433	XRAY FOOT BOTH (AP)
434	XRAY FOOT BOTH (AP/LAT)
435	XRAY FOOT BOTH (LAT)
436	XRAY FOOT LEFT (AP)

437	XRAY FOOT LEFT (AP/LAT)
438	XRAY FOOT LEFT (AP/OBL )
439	XRAY FOOT LEFT (LAT)
440	XRAY FOOT LEFT (OBL)

S. No.	Procedure Name
441	XRAY FOOT RIGHT (AP)
442	XRAY FOOT RIGHT (AP/ OBLIQUE)
443	XRAY FOOT RIGHT (AP/LAT)
444	XRAY FOOT RIGHT (AP/OBL)
445	XRAY FOOT RIGHT (LAT)
446	XRAY FOOT RIGHT (OBL)
447	XRAY HAND LEFT (AP)
448	XRAY HAND LEFT (AP/LAT)
449	XRAY HAND LEFT (AP/OBL)
450	XRAY HAND LEFT (LAT)
451	XRAY HAND LEFT (OBL)
452	XRAY HAND RIGHT (AP)
453	XRAY HAND RIGHT (AP/LAT)
454	XRAY HAND RIGHT (AP/OBL)
455	XRAY HAND RIGHT (LAT)
456	XRAY HAND RIGHT (OBL)
457	XRAY HANDS BOTH (AP/OBL)
458	XRAY HANDS BOTH (AP)
459	XRAY HANDS BOTH (AP/ LAT)
460	XRAY HANDS BOTH (LAT)
461	XRAY HEEL BOTH (AP)
462	XRAY HEEL BOTH (LAT)
463	XRAY HEEL BOTH (OBL)
464	XRAY HEEL BOTH (AP/LAT)
465	XRAY HEEL LEFT (AP)
466	XRAY HEEL LEFT (AP/LAT)
467	XRAY HEEL LEFT (AP/OBL)
468	XRAY HEEL LEFT (LAT)
469	XRAY HEEL LEFT (OBL)
470	XRAY HEEL RIGHT (AP)
471	XRAY HEEL RIGHT (AP/ LAT)
472	XRAY HEEL RIGHT (AP/OBL)
473	XRAY HEEL RIGHT (LAT)

474	XRAY HEEL RIGHT (OBL)
475	XRAY HIP JOINT BOTH (AP)
476	XRAY HIP JOINT BOTH (AP/ LAT)
477	XRAY HIP JOINT BOTH (LAT)
478	XRAY HIP JOINT BOTH (OBL)
479	XRAY HIP JOINT LEFT (AP)
480	XRAY HIP JOINT LEFT (AP/LAT)
481	XRAY HIP JOINT LEFT (AP/OBL)
482	XRAY HIP JOINT LEFT (LAT)
483	XRAY HIP JOINT LEFT OBL
484	XRAY HIP JOINT RIGHT (AP & LAT)
485	XRAY HIP JOINT RIGHT (AP)
486	XRAY HIP JOINT RIGHT (AP/OBL)
487	XRAY HIP JOINT RIGHT (LAT)
488	XRAY HIP JOINT RIGHT (OBL)
489	XRAY HUMERUS (ARM) LEFT (AP)
490	XRAY HUMERUS (ARM) LEFT (AP/LAT)

S. No.	Procedure Name
491	XRAY HUMERUS (ARM) LEFT (AP/OBL)
492	XRAY HUMERUS (ARM) LEFT (LAT)
493	XRAY HUMERUS (ARM) RIGHT (AP)
494	XRAY HUMERUS (ARM) RIGHT (AP/ LAT)
495	XRAY HUMERUS (ARM) RIGHT (LAT)
496	XRAY HUMERUS (ARM) RIGHT OBL
497	XRAY HUMERUS ARM BOTH (AP/LAT)
498	XRAY HYPOCHONDRIMUM RIGHT (XR)
499	XRAY HYPOCHONDRIMUM RIGHT (XR)
500	XRAY JAW BOTH (AP & LAT)
501	XRAY JAW BOTH (AP)
502	XRAY JAW BOTH (LAT)
503	XRAY JAW LEFT (AP/OBL)
504	XRAY JAW LEFT (AP)
505	XRAY JAW LEFT (AP/LAT)
506	XRAY JAW LEFT (LAT)
507	XRAY JAW LEFT (OBL)
508	XRAY JAW RIGHT (AP/OBL)
509	XRAY JAW RIGHT (LAT)
510	XRAY JAW RIGHT (OBL)

511	XRAY KIDNEY LEFT OBLIQUE
512	XRAY KIDNEY RIGHT OBLIQUE
513	XRAY KNEE BOTH (AP WEIGHT BEARING)
514	XRAY KNEE BOTH (AP)
515	XRAY KNEE BOTH (AP/LAT WEIGHT BEARING)
516	XRAY KNEE BOTH (LAT)
517	XRAY KNEE BOTH (OBL)
518	XRAY KNEE BOTH SKYLINE VIEW
519	XRAY KNEE BOTH TUNNEL
520	XRAY KNEE JOINT BOTH (AP & LAT)
521	XRAY KNEE JOINT LEFT (AP/ LAT)
522	XRAY KNEE JOINT RIGHT (AP/ LATERAL)
523	XRAY KNEE LEFT (AP WEIGHT BEARING)
524	XRAY KNEE LEFT (AP)
525	XRAY KNEE LEFT (AP/LAT/TUNNEL/SKYLINE)
526	XRAY KNEE LEFT (AP/LAT/WEIGHT BEARING)
527	XRAY KNEE LEFT (AP/OBL)
528	XRAY KNEE LEFT (LAT)
529	XRAY KNEE LEFT (OBL)
530	XRAY KNEE LEFT SKYLINE
531	XRAY KNEE LEFT TUNNEL (INTERCONDYLAR) VIEW
532	XRAY KNEE RIGHT (AP WEIGHT BEARING)
533	XRAY KNEE RIGHT (AP)
534	XRAY KNEE RIGHT (AP/ LAT TUNNEL)
535	XRAY KNEE RIGHT (AP/LAT/TUNNEL/SKYLINE)
536	XRAY KNEE RIGHT (AP/LAT/WEIGHT BEARING)
537	XRAY KNEE RIGHT (AP/OBL)
538	XRAY KNEE RIGHT (LAT)
539	XRAY KNEE RIGHT (OBL)
540	XRAY KNEE RIGHT SKYLINE

S. No.	Procedure Name
541	XRAY KNEE RIGHT TUNNEL (INTERCONDYLAR) VIEW
542	XRAY KUB
543	XRAY MANDIBLE BOTH (AP & OBLIQUE)
544	XRAY MANDIBLE BOTH (AP)
545	XRAY MANDIBLE BOTH (AP/LAT)
546	XRAY MANDIBLE BOTH (LAT)
547	XRAY MANDIBLE BOTH OBLIQUE

548	XRAY MANDIBLE LEFT (AP)
549	XRAY MANDIBLE LEFT (AP/OBL)
550	XRAY MANDIBLE LEFT (LAT)
551	XRAY MANDIBLE LEFT (OBL)
552	XRAY MANDIBLE RIGHT (AP)
553	XRAY MANDIBLE RIGHT (AP/ LAT)
554	XRAY MANDIBLE RIGHT (AP/OBLIQUE)
555	XRAY MANDIBLE RIGHT (LAT)
556	XRAY MANDIBLE RIGHT (OBL)
557	XRAY MASTOID LEFT (AP)
558	XRAY MASTOID LEFT (LAT)
559	XRAY MASTOID LEFT (OBL)
560	XRAY MASTOID LEFT TOWNS & STENVERS
561	XRAY MASTOID LEFT TOWNS VIEW
562	XRAY MASTOID RIGHT (AP)
563	XRAY MASTOID RIGHT (OBL)
564	XRAY MASTOID RIGHT (STENVERS)
565	XRAY MASTOIDS BOTH (AP/OBL)
566	XRAY MASTOIDS BOTH (LAT)
567	XRAY NASAL BONE (AP & BOTH LAT)
568	XRAY NASAL BONE (BILATERAL)
569	XRAY NECK (AP & LAT)
570	XRAY NECK (AP)
571	XRAY NECK (LAT)
572	XRAY NEPHROSTOGRAM
573	XRAY OPTIC FORAMINA (BIL)
574	XRAY ORBIT LEFT (AP/LAT)
575	XRAY ORBIT LEFT (AP/OBL)
576	XRAY ORBIT LEFT (LAT)
577	XRAY ORBIT LEFT (OBL)
578	XRAY ORBIT RIGHT (AP/ LAT)
579	XRAY ORBIT RIGHT (AP/LAT)
580	XRAY ORBIT RIGHT (LAT)
581	XRAY ORBIT RIGHT (OBL)
582	XRAY ORBIT RIGHT AP/OBL
583	X RAY ORBITS BOTH (AP/LAT)
584	X RAY ORBITS BOTH (AP/OBL)
585	X RAY PELVIMETRY (AP/ LAT)
586	X RAY PELVIMETRY ERECT (LAT)
587	XRAY PELVIS (AP)
588	XRAY PELVIS (AP/ BOTH LAT)

589	XRAY PELVIS (AP/ LAT)
590	X RAY PELVIS BOTH HIP (AP)

S. No.	Procedure Name
591	X RAY PELVIS FROG VIEW ONLY
592	X RAY PITUITARY FOSSA
593	X RAY PNS (AP)
594	X RAY PNS (AP/ LAT)
595	X RAY PNS (LAT)
596	XRAY PNSOM VIEW
597	XRAY PNSWN
598	X RAY POST NASAL SPACE
599	X RAY RADIUS ULNA (FOREARM) LEFT (AP)
600	X RAY RADIUS ULNA (FOREARM) LEFT (AP/ LAT)
601	X RAY RADIUS ULNA (FOREARM) LEFT (LAT)
602	X RAY RADIUS ULNA (FOREARM) RIGHT (AP)
603	X RAY RADIUS ULNA (FOREARM) RIGHT (AP/LAT)
604	X RAY RADIUS ULNA (FOREARM) RIGHT (LAT)
605	XRAY S.I JOINT AP BOTH
606	XRAY S.I JOINT OBLIQUE (RIGHT)
607	XRAY S.I. JOINT OBLIQUE (LEFT)
608	XRAY S.I.JOINTS AP & BOTH OBLIQUE
609	X RAY SACRUM COCCYX (AP/LATO)
610	X RAY SACRUM COCCYX (LAT)
611	X RAY SACRUM (AP/LAT)
612	X RAY SACRUM (LAT)
613	X RAY SCAPULA LEFT (AP/LAT)
614	X RAY SCAPULA LT OBLIQUE
615	X RAY SCAPULA RIGHT (AP)
616	X RAY SCAPULA RIGHT (AP/LAT)
617	XRAY SHOULDER JOINT LEFT Y VIEW
618	XRAY SHOULDER JOINT RIGHT Y VIEW
619	X RAY SHOULDER LEFT (AP)
620	X RAY SHOULDER LEFT (AP/LAT)
621	X RAY SHOULDER LEFT (AP/OBL)
622	X RAY SHOULDER LEFT (LAT)
623	X RAY SHOULDER LEFT (OBL)
624	XRAY SHOULDER RIGHT (AP/OBL)
625	XRAY SHOULDER RIGHT (LAT)

626	XRAY SHOULDER SWIMMERS VIEW
627	XRAY SHOULDERS BOTH (AP & LAT)
628	XRAY SHOULDERS RIGHT (AP)
629	XRAY SHOULDERS RIGHT (AP/LAT)
630	XRAY SHOULDERS RIGHT OBLIQUE
631	X RAY SKULL (AP & LAT)
632	X RAY SKULL (AP)
633	X RAY SKULL (LAT PIT FOSSA)
634	X RAY SKULL (LAT)
635	XRAY SKULL BASAL VIEW
636	XRAY SKULL STENWERS VIEW
637	XRAY SKULL TANGENTIAL VIEW
638	X RAY SKULL TOWNES VIEW
639	X RAY SMALL BOWEL ENEMA
640	X RAY SOFT TISSUE NECK

S. No.	Procedure Name
641	X RAY SPINE CERVICAL (AP/LAT BOTH OBL)
642	X RAY SPINE CERVICAL (AP)
643	X RAY SPINE CERVICAL (AP/ LAT)
644	X RAY SPINE CERVICAL (AP/LAT/EXT/FLEX)
645	X RAY SPINE CERVICAL (AP/LAT/OBL EXT/FLEX)
646	X RAY SPINE CERVICAL (EXTENSION/FLEXION)
647	X RAY SPINE CERVICAL (LAT)
648	X RAY SPINE CERVICAL AP FOR RIBS
649	XRAY SPINE CERVICAL BOTH OBLIQUE
650	X RAY SPINE CERVICAL FLEXION
651	XRAY SPINE COCCYX (LAT)
652	XRAY SPINE COCCYX (AP)
653	XRAY SPINE COCCYX (AP/ LAT)
654	XRAY SPINE DORSAL (THORACIC) (AP & LAT)
655	XRAY SPINE DORSAL (THORACIC) (AP)
656	XRAY SPINE DORSAL (THORACIC) (AP/LAT/BOTH OBL)
657	XRAY SPINE DORSAL (THORACIC) (LAT)
658	XRAY SPINE DORSAL (THORACIC) (OBL)
659	X RAY SPINE LUMBOSACRAL (AP/LAT)
660	X RAY SPINE LUMBAR (AP)
661	X RAY SPINE LUMBAR (AP/LAT BOTH OBLIQUES)
662	X RAY SPINE LUMBAR (AP/LAT)

663	X RAY SPINE LUMBAR (AP/LAT/BOTH OBLEXT/FLEX)
664	X RAY SPINE LUMBAR (EXTENSION/FLEXION)
665	X RAY SPINE LUMBAR (LAT)
666	XRAY SPINE LUMBAR BOTH OBLIQUE
667	X RAY SPINE LUMBAR (AP/LAT/EXT/FLEX)
668	X RAY SPINE LUMBOSACRAL (AP)
669	XRAY SPINE SACRUM (AP)
670	XRAY SPINE SACRUM (AP/ LAT)
671	XRAY SPINE SACRUM (LAT)
672	X RAY STERNOCLAVICULAR JOINT LEFT (OBL)
673	X RAY STERNOCLAVICULAR JOINT BOTH (AP)
674	X RAY STERNOCLAVICULAR JOINT LEFT (AP)
675	X RAY STERNOCLAVICULAR JOINT RIGHT (AP)
676	X RAY STERNOCLAVICULAR JOINT RIGHT (OBL)
677	X RAY STERNUM (AP/ LAT)
678	X RAY STERNUM (LAT)
679	X RAY STERNUM OBLIQUE
680	X RAY T.M. JOINT (SINGLE VIEW)
681	X RAY T.M.J RIGHT (AP)
682	X RAY THORACIC INLET (AP)
683	X RAY THORACIC INLET (AP/LAT)
684	XRAY THUMB LEFT (AP)
685	XRAY THUMB LEFT (AP/LAT)
686	XRAY THUMB LEFT (LAT)
687	XRAY THUMB RIGHT (AP)
688	XRAY THUMB RIGHT (AP/LAT)
689	XRAY THUMB RIGHT (LAT)
690	X RAY TIBIA FIBULA (LEG) BOTH (AP)

S. No.	Procedure Name
691	X RAY TIBIA FIBULA (LEG) BOTH (AP/LAT)
692	X RAY TIBIA FIBULA (LEG) BOTH (AP/OBL)
693	X RAY TIBIA FIBULA (LEG) BOTH (LAT)
694	X RAY TIBIA FIBULA (LEG) BOTH (OBL)
695	X RAY TIBIA FIBULA (LEG) LEFT (AP)
696	X RAY TIBIA FIBULA (LEG) LEFT (AP/LAT)
697	X RAY TIBIA FIBULA (LEG) LEFT (AP/OBL)
698	X RAY TIBIA FIBULA (LEG) LEFT (LAT)
699	X RAY TIBIA FIBULA (LEG) LEFT (OBL)

700	X RAY TIBIA FIBULA (LEG) RIGHT (AP)
701	X RAY TIBIA FIBULA (LEG) RIGHT (AP/LAT)
702	X RAY TIBIA FIBULA (LEG) RIGHT (AP/OBL)
703	X RAY TIBIA FIBULA (LEG) RIGHT (LAT)
704	X RAY TIBIA FIBULA (LEG) RIGHT (OBL)
705	X RAY TM JOINT RIGHT(OPEN CLOSE MOUTH)
706	X RAY TM. JOINT LEFT
707	X RAY TM. JOINTS LEFT (OPEN & CLOSE)
708	XRAY TOE BOTH (AP/LAT)
709	XRAY TOE LEFT (AP)
710	XRAY TOE LEFT (AP/LAT)
711	XRAY TOE LEFT (LAT)
712	XRAY TOE RIGHT (AP)
713	XRAY TOE RIGHT (AP/LAT)
714	XRAY TOE RIGHT (LAT)
715	XRAY URINARY BLADDER
716	XRAY WRIST FOR SCAPHOID
717	XRAY WRIST HAND (BONE AGE) UPTO 5 YEARS
718	XRAY WRIST JOINT (AP/ LAT)
719	XRAY WRIST JOINT BALL CATCHERS VIEW
720	XRAY WRIST JOINT BOTH (AP/ LAT)
721	XRAY WRIST JOINT BOTH (LAT)
722	XRAY WRIST JOINT BOTH OBLIQUE
723	XRAY WRIST JOINT LEFT (AP)
724	XRAY WRIST JOINT LEFT (AP/LAT)
725	XRAY WRIST JOINT LEFT (AP/LAT/OBL)
726	XRAY WRIST JOINT LEFT (LAT)
727	XRAY WRIST JOINT LEFT OBLIQUE
728	XRAY WRIST JOINT RIGHT (AP)
729	XRAY WRIST JOINT RIGHT (AP/ LAT)
730	XRAY WRIST JOINT RIGHT (AP/LAT/OBL)
731	XRAY WRIST JOINT RIGHT (LAT)
732	XRAY WRIST JOINT RIGHT OBLIQUE
733	X RAY ABDOMEN ERECT (AP)
734	XRAY ADDITION FILM
735	XRAY ELBOW JOINT BOTH (AP)
736	XRAY ELBOW JOINT BOTH (AP/LAT)
737	XRAY ELBOW JOINT BOTH (LAT)
738	XRAY ELBOW JOINT LEFT (AP/LAT)
739	X RAY JAW RIGHT (AP & LAT)
740	X RAY JAW RIGHT (AP)

S. No.	Procedure Name
741	XRAY PER EXPOSURE WITH PRINT
742	X RAY PROCEDURE IN THEATRE
743	XRAY WRIST JOINT BOTH (AP)
744	X RAY MAMMOGRAM (ADDITIONAL VIEW)
745	X RAY MAMMOGRAM ADDITIONAL VIEW (CONE COMPRESSION VIEW)
746	X RAY MAMMOGRAM BILATERAL
747	X RAY MAMMOGRAM BILATERAL WITH US (PACKAGE)
748	X RAY MAMMOGRAM UNILATERAL
749	X RAY MAMMOGRAM UNILATERAL WITH US (PACKAGE)
750	X RAY DEXA SCAN
751	DIAGNOSTIC TAP (ASCITIC / PLEURAL)
752	DRESSING CHARGES
753	FNAC
754	INJECTION SCLEROTHERAPY BY STS
755	LIVER ABSCESS DRAINAGE
756	PAIR PROCEDURE (single)
757	PERMCATH REMOVE
758	PIGTAIL INSERTION ( Locking )
759	PIGTAIL INSERTION ( Non-Locking)
760	PIGTAIL REMOVE
761	RFA FOR SOFT TISSUE TUMORS
762	RFA FOR VARICOSE VEINS
763	THERAPEUTIC TAP (ASCITIC / PLEURAL)
764	ULTRASOUND GUIDED BIOPSY
765	ULTRASOUND GUIDED REPEAT BIOPSY
766	MICROWAVE ABLATION
767	ABSCESS DRAINAGE
768	AV FISTULOGRAM
769	BALLOON PLASTY
770	BRONCHIAL ARTERY EMBOLIZATION
771	CATHETER REMOVE
772	CEREBRAL ANGIOGRAPHY
773	CHOLANGIOGRAM
774	CHOLECYSTOSTOMY (PIGTAIL INSERTION)
775	CT GUIDED BIOPSY (TRUCUT)
776	CVP LINE INSERTION

777	DIAGNOSTIC ANGIOGRAPHY
778	DJ STENTING (single)
779	DL CATHETER INSERTION
780	FLUOROSCOPY ASSISTANCE FOR VIR
781	GI BLEED EMBOLIZATION
782	IVC FILTER INSERTION
783	LUMBAR PUNCTURE PROCEDURE
784	NEPHROGRAM
785	PCN (BILATERAL)
786	PCN (single)
787	PERIPHERAL ANGIOGRAPHY
788	PERIPHERAL ANGIOPLASTY
789	PERMCATH INSERTION

S. No.	Procedure Name
790	PICC LINE INSERTION
791	PTC
792	PTC WITH STENTING
793	T-TUBE CHOLANGIOGRAM
794	TACE PROCEDURE
795	TIPS PROCEDURE
796	TRANSARTERIAL EMBOLIZATION
797	UTERINE FIBROID EMBOLIZATION
798	VENOGRAM
799	VENOPLASTY
800	VIR CONSULTATION CLINIC
801	PICC LINE INSERTION 2
802	PTC 2
803	TACE PROCEDURE 2
804	TRANSTHORACIC ECHOCARDIOGRAPHY
805	PORTABLE ECHO
806	X RAY BARIUM ENEMA
807	X RAY BARIUM MEAL
808	X RAY BARIUM MEAL FOLLOW THROUGH
809	X RAY BARIUM SWALLOW
810	X RAY BARIUM SWALLOW MEAL
811	X RAY GASTROGRAFIN ENEMA
812	X RAY GASTROGRAFIN MEAL
813	X RAY FISTULOGRAM

814	X RAY GASTROGRAFIN FOLLOW THROUGH
815	X RAY GASTROGRAFIN SWALLOW
816	X RAY LOOPOGRAM
817	X RAY MYELOGRAM
818	X RAY MICTURATING CYSTOURETHROGRAM (M.C.U.G)
819	X RAY SINOGRAM
820	X RAY T.TUBE CHOLANGIOGRAM
821	X RAY URETHROGRAM
822	X RAY I.V.P & MIC CYSTOURETHROGRAM
823	X RAY I.V.P NON IONIC
824	X RAY HYSTEROSALPINGOGRAM (HSG)