

Patient Name	: Mr.SANJAY	Visit No	: CHA250033496
Age/Gender	: 43 Y/M	Registration ON	: 24/Feb/2025 06:45PM
Lab No	: 10130792	Sample Collected ON	: 24/Feb/2025 06:45PM
Referred By	: Dr.YK ARORA	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 24/Feb/2025 08:11PM

ULTRASOUND STUDY OF WHOLE ABDOMEN

- **Liver** is moderately enlarged in size (~200mm) with multiple heterogeneous irregular space occupying lesions with low level internal echoes in right lobe of liver, largest measuring approx. 70x49x64mm with volume approx. 118cc...Evolving / resolving liver abscesses. No intrahepatic biliary radicle dilatation is seen. Hepatic veins and IVC are seen normally.
- **Gall bladder** is collapsed with edematous G.B. wall.
- **CBD** is normal at porta. No obstructive lesion is seen.
- **Portal vein** Portal vein is normal at porta.
- **Pancreas** is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is mildly enlarged in size (~126mm) and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- **Both kidneys** are normal in size and position. No hydronephrosis is seen. No mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 96x49mm in size. Left kidney measures 93x53mm in size. **Tiny calculus of size ~3.9mm is seen in upper/mid pole of right kidney.**
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is normal in contour with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- **Prostate** is normal in size measures 30x24x28mm with weight of 11.05gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

- MODERATE HEPATOMEGALY WITH MULTIPLE HETEROGENEOUS IRREGULAR SPACE OCCUPYING LESIONS WITH LOW LEVEL INTERNAL ECHOES IN RIGHT LOBE OF LIVER.....EVOLVING / RESOLVING LIVER ABSCESSSES.
- COLLAPSED GALL BLADDER WITH EDEMATOUS G.B. WALL.
- MILD SPLENOMEGALY
- TINY RIGHT RENAL CALCULUS.

Clinical correlation is necessary.

[DR. K K SINGH , RADIOLOGIST]

[DR. R.K SINGH , MD]

*** End Of Report ***

