

Patient Name	: Ms.SUNDER PATA	Visit No	: CHA250034185
Age/Gender	: 56 Y/F	Registration ON	: 25/Feb/2025 04:09PM
Lab No	: 10131481	Sample Collected ON	: 25/Feb/2025 04:09PM
Referred By	: Dr.KGMU (ONCO)	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 26/Feb/2025 11:48AM

CT WHOLE ABDOMEN

CECT STUDY OF WHOLE ABDOMEN

CT study performed before and after injecting (intravenous) 80ml of non ionic contrast media and oral administration of 20ml contrast media diluted with water.

- **Liver** is enlarged in size [Span~150mm], and shows normal density of parenchyma. No intrahepatic biliary radicle dilatation is seen. Hepatic veins and IVC are seen normally.
- **Gall bladder** gall bladder fossa is occupied by a large exophytic heterogeneously enhancing lobulated mass infiltrating liver and extending inferiorly to right iliac fossa. This lesion shows smaller conglomerated enhancing nodular lesions. The lesion involves liver, hepatic flexure of colon and displaces duodenum. This lesion involves peritoneum and anterior abdominal wall also. The space occupying lesion measures 162 x 160 x 152mm in size. **(CT is not modality of choice for biliary and gall bladder calculi).**
- **CBD** is compressed.
- **Portal vein** Portal vein is normal at porta.
- **Pancreas** head of pancreas is compressed and homogenous density of parenchyma is seen. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is normal in size and shows homogenous density of parenchyma. No SOL is seen.
- **Both Kidneys** are normal in size and position. No hydronephrosis is seen. No calculus is seen. Right kidney shows small cortical cyst in mid polar region, measuring 10 x 10mm.
- **Both** ureters are normal in course and calibre.
- Multiple omental and peritoneal based enhancing nodules are seen, largest measuring 31 x 30mm.
- Enlarged retroperitoneal nodes are seen, largest node measures 20 x 17mm in left para-aortic region.
- Mild ascites is seen.
- **Urinary Bladder** is normal in contour with normal lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- **Uterus** is normal in size and shows homogenous myometrial density. No endometrial collection is seen. No mass lesion is seen.
- **Cervix** is normal.
- No adnexal mass lesion is seen.
- Opacified bowel loops are seen normally. No abnormally thickened / edematous bowel loop is seen. No bowel origin mass lesion is seen.



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IMPRESSION:

- **MILD HEPATOMEGALY.**
- **LARGE EXOPHYTIC HETEROGENEOUSLY ENHANCING LOBULATED MASS ARISING FROM GALL BLADDER FOSSA AND INFILTRATING LIVER AND EXTENDING INFERIORLY TO RIGHT ILIAC FOSSA WITH EXTENSIONS AS DESCRIBED -----MALIGNANT GROWTH [?? GALL BLADDER MASS].**
- **MULTIPLE OMENTAL AND PERITONEAL DEPOSITS.**
- **MILD ASCITES.**
- **UPPER ABDOMINAL LYMPHADENOPATHY/**
- **TINY RIGHT RENAL CORTICAL CYST (BOSNIAK TYPE-I).**

Clinical correlation is necessary.

Transcribed by Purvi

[DR. RAJESH KUMAR SHARMA, MD]

*** End Of Report ***

CHARAK

