

Patient Name	: Mr. SHAKIB ZAMA	Visit No	: CHA250034272
Age/Gender	: 42 Y/M	Registration ON	: 25/Feb/2025 06:20PM
<b>Lab No</b>	<b>: 10131568</b>	Sample Collected ON	: 25/Feb/2025 06:20PM
Referred By	: Dr. EVA HOSPITAL	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 26/Feb/2025 12:43PM

## MRCP

### IMAGING SEQUENCES (NCMR)

**AXIAL:** T1, T2 & T2fs. **CORONAL:** T1 & T2 W images; SSFSE.

**Liver** is mildly enlarged (approx. 16.6cms). Margins are regular. No focal lesion is seen. Portal and hepatic venous channels are within normal limits.

**Gall bladder** is mildly over distended and shows diffuse edematous wall thickening (maximum thickness 6.2mm). Diffuse pericholecystic and subhepatic fat stranding is noted. A T2 hypointense filling defect measuring approx. 6.1 x 5.5mm is seen in proximal part of cystic duct just distal to the junction with neck of gall bladder. Rest of the cystic duct is partially effaced and shows normal insertion. Small sludge is seen in gall bladder lumen at neck region.

**Biliary system:** No intrahepatic biliary radical dilatation is noted. Anatomy of the intrahepatic ductal system is normal. CBD is not dilated measuring approx. 4.1mm at the porta with smooth distal tapering. No obvious intraluminal filling defect/calculus is seen on the base or MIP images. No obvious stricture is seen. Pancreatic duct and common bile duct are opening through a common ampulla at second part of duodenum. No abrupt termination or mass at ampullary region is seen.

**Pancreas** is normal in size and MR morphology. Margins are regular. Pancreatic duct is not dilated. No focal lesion is observed. No suggestion of pancreatic divisum or chronic pancreatitis is seen.

**Spleen** is mildly enlarged (approx. 13.6cms). No focal lesion is observed.

**Kidneys:** Both kidneys are normal in position and size. No hydronephrosis noted. Visualized upper ureters are normal.

*Few prominent periportal lymphnodes are seen, largest measuring approx. 17 x 14mm.*

No free fluid is seen.

## IMPRESSION:

- **Acute cholecystitis with calculus in proximal part of cystic duct.**
- **Mild hepato-splenomegaly.**

Please correlate clinically.

**DR. RAVENDRA SINGH**  
**MD**

Transcribed by R R...

\*\*\* End Of Report \*\*\*



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