Charak dhar DIAGNOSTICS Pvt. Ltd.

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CMO Reg. No. RMEE 2445133
NABL Reg. No. MC-2491
Certificate No. MIS-2023-0218

Patient Name	: Mr.DHARAMJIT SINGH	Visit No	: CHA250035569
Age/Gender	: 91 Y/M	Registration ON	: 27/Feb/2025 02:51PM
Lab No	**: 10132865**	Sample Collected ON	: 27/Feb/2025 02:51PM
Referred By	: Dr.RDSO LUCKNOW	Sample Received ON	:
Refer Lab/Hosp	: RDSO LUCKNOW	Report Generated ON	: 27/Feb/2025 05:02PM

PR.

ULTRASOUND STUDY OF WHOLE ABDOMEN

Compromised assessment due to excessive bowel gases

- **Liver** is normal in size, and shows homogenous echotexture of liver parenchyma. No intrahepatic biliary radicle dilatation is seen. No space occupying lesion is seen. Hepatic veins and IVC are seen normally.
- **Gall bladder** neck of gall bladder is obscured by bowel gases. Rest of gall bladder shows anechoic lumen.
- **CBD** is normal at porta. No obstructive lesion is seen.
- **Portal vein** Portal vein is normal at porta.
- **Pancreas** *is obscured due to bowel gases.*
- **Spleen** is normal in size and shows homogenous echotexture of parenchyma. No SOL is seen.
- No ascites is seen.
- **Both kidneys** are normal in size and position. No hydronephrosis is seen. **Few tiny concretions are seen in right kidney at mid and lower poles measuring 2-3mm.** No mass lesion is seen. **Bilateral raised renal parenchymal echogenicity.** Cortico-medullary differentiation is well maintained. No scarring is seen. Right kidney measures 92 x 47 mm in size. Left kidney measures 85 x 50 mm in size.
- **Urinary bladder** is empty.
- **Prostate** is normal in size and shows homogenous echotexture of parenchyma.

OPINION:

- **Bilateral raised renal parenchymal echogenicity.**
- **Right renal concretions.**

Clinical correlation is necessary.

(DR. JAYENDRA KUMAR, MD)

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PR.

COLOUR DOPPLER STUDY OF BILATERAL LOWER LIMB VEINS AND ARTERIES

VENOUS:

- Bilateral common femoral, superficial femoral, popliteal and visualized parts of bilateral tibial veins reveal clear lumen and normal colour flow with normal phasicity, compressibility and augmentation response.
- *Bilateral anterior and posterior tibial veins could not be very well evaluated in complete extent.*
- There is maintained color flow across bilateral sapheno-femoral junctions; competence could not be assessed as patient was unable to perform valsalva maneuver.
- *Bilateral sapheno popliteal junctions could not be very well evaluated.*
- **Minimal to mild subcutaneous edema is seen in bilateral lower limbs, predominantly in distal leg and foot regions.**

ARTERIAL:

- **Diffuse atherosclerotic changes are seen involving visualized parts of bilateral lower limb arteries causing moderate to severe luminal narrowing; predominantly involving distal arterial system with maintained color flow.**
- **Bilateral common femoral, superficial femoral and popliteal arteries show triphasic spectral waveform with spectral broadening.**
- **Proximal segments of left anterior & posterior tibial arteries show triphasic with spectral broadening.**
- **Mid segments of left anterior & posterior tibial arteries show biphasic spectral waveform.**
- **Distal segments of left anterior & posterior tibial arteries and visualized part of left dorsalis pedis artery show monophasic spectral waveform.**
- **Proximal segments of right anterior & posterior tibial arteries show biphasic spectral waveform.**
- **Mid & distal segments of right anterior & posterior tibial arteries show monophasic spectral waveform.**
- *Right dorsalis pedis artery could not be assessed due to overlying bandages.*

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Colour Doppler study shows following indices-

	FLOW VELOCITY RIGHT	WAVE PATTERN	FLOW VELOCITY LEFT	WAVE PATTERN
Common femoral artery	105 cm/sec	Triphasic with spectral broadening	117 cm/sec	Triphasic with spectral broadening
Superficial femoral artery	108 cm/sec	Triphasic with spectral broadening	102 cm/sec	Triphasic with spectral broadening
Popliteal artery	88 cm/sec	Triphasic with spectral broadening	82 cm/sec	Triphasic with spectral broadening
Anterior tibial artery	48 cm/sec	Biphasic / Monophasic	40cm/sec	Triphasic with spectral broadening / Biphasic / Monophasic
Posterior tibial artery	49cm/sec	Biphasic / Monophasic	46 cm/sec	Triphasic with spectral broadening / Biphasic / Monophasic
Dorsal paedis artery	-		22 cm/sec	Monophasic

IMPRESSION:

- **NO EVIDENCE OF DEEP VEIN THROMBOSIS IN VISUALIZED VEINS.**
- **DIFFUSE GENERALIZED ATHEROSCLEROTIC CHANGES IN BILATERAL LOWER LIMB ARTERIES CAUSING MODERATE TO SEVERE LUMINAL NARROWING WITH HEMODYNAMIC CHANGES AS DESCRIBED ABOVE.**
- **MINIMAL TO MILD SUBCUTANEOUS EDEMA IN BILATERAL LOWER LIMBS, PREDOMINANTLY IN DISTAL LEG AND FOOT REGIONS.**

Clinical correlation is necessary.

[DR. JAYENDRA K. ARYA, MD]

Transcribed By: Purvi

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