

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

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

Patient Name : Mr.RAMESH KUMAR SRIVASTAVA

Age/Gender : 60 Y/M **Lab No** : **10134124** 

Referred By : Dr.KGMU
Refer Lab/Hosp : CHARAK NA

Visit No : CHA250036828

Registration ON : 01/Mar/2025 10:56AM Sample Collected ON : 01/Mar/2025 10:56AM

Sample Received ON

Report Generated ON : 01/Mar/2025 11:47AM

## **ULTRASOUND STUDY OF WHOLE ABDOMEN**

- <u>Liver</u> is mildly enlarged in size (~ 165 mm) and shows increased echotexture of liver parenchyma. No intrahepatic biliary radicle dilatation is seen. No space occupying lesion is seen. Hepatic veins and IVC are seen normally.
- <u>Gall bladder</u> is normal in size and shows anechoic lumen. No calculus / mass lesion is seen. GB walls are not thickened.
- **CBD** is normal at porta. No obstructive lesion is seen.
- Portal vein is normal at porta.
- <u>Pancreas</u> is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- <u>Spleen</u> is normal in size and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- <u>Both kidneys</u> are normal in size and position. No hydronephrosis is seen. No calculus or mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 92 x 44 mm in size. Left kidney measures 87 x 40 mm in size.
- <u>Ureters</u> Both ureters are not dilated. UVJ are seen normally.
- <u>Urinary bladder</u> is partially distended (Pre void urine volume approx 38cc).
- Bilateral seminal vesicles are seen normally.
- **Prostate** is normal in size, measures 33 x 34 x 35 mm with weight of 20gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

## **OPINION:**

• Mild hepatomegaly with fatty infiltration of liver grade-I.

(Possibility of acid peptic disease could not be ruled out).

Clinical correlation is necessary.

[DR. R.K. SINGH, MD]





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## SKIAGRAM CHEST PA VIEW

- Both lung fields are clear.
- Bilateral hilar shadows are prominent.
- Cardiac shadow is within normal limits.
- Both CP angles are clear.
- Dorsal vertebrae show lateral osteophytes.
- Both domes of diaphragm are sharply defined.

## **IMPRESSION:**

• NO ACTIVE LUNG PARENCHYMAL LESION IS DISCERNIBLE.

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed by Gausiya

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

