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

Patient Name : Mr.ADITYA GUPTA

Age/Gender : 28 Y/M **Lab No** : **10134442**

Referred By : Dr. SELF

Refer Lab/Hosp : CHARAK NA

Visit No : CHA250037146

Registration ON : 01/Mar/2025 02:41PM Sample Collected ON : 01/Mar/2025 02:41PM

Sample Received ON :

Report Generated ON : 01/Mar/2025 03:18PM

ULTRASOUND STUDY OF WHOLE ABDOMEN

Compromised assessment due to excessive bowel gases.

- <u>Liver</u> is mildly enlarged in size 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.
- **Gall bladder** is partially distended (post prandial), however visualized parts appear normal.
- **<u>CBD</u>** is normal at porta. No obstructive lesion is seen.
- **<u>Portal vein</u>** 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 93 x 44mm in size. Left kidney measures 103 x 45mm in size.
- **<u>Ureters</u>** Both ureters are not dilated. **<u>UVJ</u>** are seen normally.
- <u>Urinary bladder</u> is partially distended with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- Bilateral seminal vesicles are seen normally.
- <u>Prostrate</u> is normal in size 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]

Transcribed By: Purvi

*** End Of Report ***

