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Certificate No. MIS-2023-0218

Patient Name : Ms. MAHJABI Visit No : CHA250037677

 Age/Gender
 : 35 Y/F
 Registration ON
 : 02/Mar/2025 12:27PM

 Lab No
 : 10134972
 Sample Collected ON
 : 02/Mar/2025 12:27PM

Referred By : Dr. YOGESH CHANDRA Sample Received ON

Refer Lab/Hosp : CHARAK NA Report Generated ON : 02/Mar/2025 01:35PM

## ULTRASOUND STUDY OF WHOLE ABDOMEN

## Excessive gaseous abdomen

PR

- <u>Liver</u> is mildly enlarged in size (~154mm) 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 <u>echotexture</u> of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- Both kidneys are normal in size and position. No hydronephrosis is seen. Concretions are seen at mid pole in both kidneys measuring approx 2-3mm. No mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 84 x 35 mm in size. Left kidney measures 84 x 38 mm in size.
- <u>Ureters</u> Both ureters are not dilated. UVJ are seen normally.
- <u>Urinary bladder</u> is normal in contour with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- <u>Uterus</u> is not visualized (post operative).
- No adnexal mass lesion is seen.

## **OPINION:**

- MILD HEPATOMEGALY WITH FATTY INFILTRATION OF LIVER GRADE-I.
- BILATERAL RENAL CONCRETIONS.

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

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed by Gausiya



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