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

Patient Name : Ms.GEETA TRIPATHI Visit No : CHA250038700

 Age/Gender
 : 63 Y/F
 Registration ON
 : 04/Mar/2025 09: 28AM

 Lab No
 : 10135995
 Sample Collected ON
 : 04/Mar/2025 09: 28AM

Referred By : Dr.PUSHPLATA YADAV Sample Received ON

Refer Lab/Hosp : CGHS (BILLING) Report Generated ON : 04/Mar/2025 11:12AM

## ULTRASOUND STUDY OF WHOLE ABDOMEN

## Excessive gaseous abdomen

- <u>Liver</u> is mildly enlarged in size, and shows homogenously 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 83 x 36 mm in size. Left kidney measures 98 x 38 mm in size.
- <u>Ureters</u> Both ureters are not dilated. <u>UVJ</u> 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 atrophic .Endometrial thickness measures 4.5 mm. No endometrial collection is seen. No mass lesion is seen.
- No adnexal mass lesion is seen.
- Post void residual urine volume is nil.

## **OPINION:**

• MILD HEPATOMEGALY WITH FATTY INFILTRATION OF LIVER GRADE-I.

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

transcribed by: anup

