

Patient Name	: Ms.RAJ RANI	Visit No	: CHA250038810
Age/Gender	: 55 Y/F	Registration ON	: 04/Mar/2025 11:08AM
<b>Lab No</b>	<b>: 10136105</b>	Sample Collected ON	: 04/Mar/2025 11:08AM
Referred By	: Dr.SELF	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 04/Mar/2025 12:27PM

**ULTRASOUND STUDY OF WHOLE ABDOMEN**

- **Liver** is mildly enlarged in size, and shows mildly coarse 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 normal in size and shows anechoic lumen. No calculus / mass lesion is seen. GB walls are diffusely thickened.
- **CBD** is normal at porta. No obstructive lesion is seen.
- **Portal vein** Portal vein is normal at porta.
- **Pancreas** is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is normal in size and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- Moderate ascites is seen.
- **Both kidneys** 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 82 x 35 mm in size. Left kidney measures 82 x 37 mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is normal in contour with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- **Uterus** is normal in size, measures 61 x 24 x 28 mm and shows homogenous myometrial echotexture. Endometrial thickness measures 3.3 mm. No endometrial collection is seen. No mass lesion is seen.
- **Cervix** is normal.
- **Both ovaries** are normal in size and echotexture.
- No adnexal mass lesion is seen.

**OPINION:**

- MILD HEPATOMEGALY WITH MILDLY COARSE HEPATIC ECHOTEXTURE WITH DIFFUSELY EDEMATOUS GALL BLADDER WALL WITH MODERATE ASCITES....? CHRONIC LIVER DISEASE....ADV: LFT AND FIBROSCAN ..

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

TRANSCRIBED BY: ANUP



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