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| Patient Name | : Mr.RAJEEV KUMAR | Visit No | : CHA250038847 |
| Age/Gender | : 44 Y/M | Registration ON | : 04/Mar/2025 11:30AM |
| Lab No | : 10136142 | Sample Collected ON | : 04/Mar/2025 11:30AM |
| Referred By | : Dr.KALYAN MULLICK | Sample Received ON | : |
| Refer Lab/Hosp | : CHARAK NA | Report Generated ON | : 04/Mar/2025 12:39PM |

ULTRASOUND STUDY OF WHOLE ABDOMEN

- **Liver** is normal in size, and shows homogenous 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 not 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.
- No ascites is seen.
- **Both kidneys** are normal in size and position. No hydronephrosis is seen. A tiny concretion measuring 1.8mm is seen in lower pole of left kidney .No mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 83 x 40 mm in size. Left kidney measures 85 x 43 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.
- Bilateral seminal vesicles are seen normally.
- **Prostate** is normal in size measures 31 x 30 x 33 mm with weight of 16 gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

- **MILD HEPATOMEGALY WITH FATTY INFILTRATION OF LIVER GRADE-I.**
- **TINY LEFT RENAL CONCRETION .**

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

[DR. R.K SINGH , MD]

transcribed by: anup

*** End Of Report ***

