

Patient Name	: Ms.MUSKAN	Visit No	: CHA250039563
Age/Gender	: 20 Y/F	Registration ON	: 05/Mar/2025 10:51AM
<b>Lab No</b>	<b>: 10136858</b>	Sample Collected ON	: 05/Mar/2025 10:51AM
Referred By	: Dr.KGMU	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 05/Mar/2025 12:32PM

### **ULTRASOUND STUDY OF WHOLE ABDOMEN**

- **Liver** is normal in size (~125mm) 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 homogeneous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is normal in size (~104mm) and **shows heteroechoic echotexture of parenchyma**. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- **Gross 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 87 x 42 mm in size. Left kidney measures 95 x 47 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 63 x 27 mm and shows homogenous myometrial echotexture. Endometrial thickness measures 6 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:**

- **HETEROECHOIC SPLENIC ECHOTEXTURE.**
- **GROSS ASCITES.**

**Clinical correlation is necessary.**

**DR. NISMA WAHEED  
MD, RADIODIAGNOSIS**

Transcribed By: Gausiya

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

