

Patient Name : Mr. ANIKET KASHYAP	Visit No : CHA250040796
Age/Gender : 19 Y/M	Registration ON : 06/Mar/2025 06: 10PM
Lab No : 10138091	Sample Collected ON : 06/Mar/2025 06: 16PM
Referred By : Dr. KGMU (ONCO)	Sample Received ON : 06/Mar/2025 06: 25PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 06/Mar/2025 06: 47PM
Doctor Advice : DIGITAL 2, CONTRAST MRI, CREATININE, MRI joint (per parts)	



Test Name	Result	Unit	Bio. Ref. Range	Method
SERUM CREATININE				
CREATININE	0.70	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic

*** End Of Report ***



CHARAK



[Checked By]

DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADABKHAN
PATHOLOGIST

Dr. SYED SAIF AHMAD
MD (MICROBIOLOGY)

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Lab No : 10138091 Sample Collected ON : 06/Mar/2025 06:10PM
Referred By : Dr.KGMU (ONCO) Sample Received ON :
Refer Lab/Hosp : CHARAK NA Report Generated ON : 07/Mar/2025 03:46PM

CEMRI: RIGHT THIGH WITH PELVIS

IMAGING SEQUENCES (CEMR)

AXIAL: T1 & TSE T2 Wis. **CORONAL:** T1 & TIRM Wis.

Post Contrast : T1 sagittal, axial & coronal

Large relatively well defined heterogeneously enhancing soft tissue lesion [approx. 13 (vertical) x 12.5 (A.P) x 12cm (Trans)] is seen in antero-lateral aspect of right proximal thigh in the subcutaneous plane. The lesion appears heterogeneously hyperintense on T2/TIRM and hypointense on T1 W images with few T1 hyperintense areas. Laterally the lesion is involving overlying skin. Medially it is abutting sartorius, tensor fascia lata, gluteus medius and minimus muscles, however no evidence of invasion or deeper extension is seen. The lesion is focally abutting right anterior inferior iliac spine, however no bony erosion is seen. No bony involvement or encasement of femoral neurovascular bundles is seen. Mild subcutaneous tissue edema is seen adjacent to the lesion.

Few enlarged heterogeneously enhancing right inguinal lymphnodes are seen, largest measuring approx 32 x 22 mm.

Visualised part of both femori are normal in outline, shape and MR signal intensity. No evidence of avascular necrosis of femoral head. Both hip joints are showing normal articulation and alignment. Visualised pelvic bones are showing normal signal intensity and outline. Femoral shaft is showing normal cortical signal intensity, medullary signal and Cortico-medullary differentiation. No obvious intraosseous or periosteal abnormality is detected.

Visualized thigh muscles are displaying normal MR morphology, signal intensity and outline.

Femoral and popliteal neurovascular bundle is normally visualised.

IMPRESSION

- **Large relatively well defined heterogeneously enhancing subcutaneous soft tissue lesion in antero-lateral aspect of right proximal thigh with features and inguinal lymphadenopathy as described – neoplastic etiology (soft tissue sarcoma). Histopathological correlation is suggested.**

Please correlate clinically.

**DR. RAVENDRA SINGH
MD**

Transcribed by Priyanka...

*** End Of Report ***



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