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Certificate No. MIS-2023-0218

Patient Name : Mr.MUKESH KUMAR MEENA Visit No : CHA250040922

 Age/Gender
 : 37 Y/M
 Registration ON
 : 07/Mar/2025 08:35AM

 Lab No
 : 10138217
 Sample Collected ON
 : 07/Mar/2025 08:35AM

Referred By : Dr.RDSO LUCKNOW Sample Received ON

Refer Lab/Hosp : RDSO LUCKNOW Report Generated ON : 07/Mar/2025 08:52AM

ULTRASOUND STUDY OF WHOLE ABDOMEN

Excessive gaseous abdomen

H.

- <u>Liver</u> is mildly enlarged in size (~167mm) and shows 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. A concretion is seen at mid pole of right kidney measuring approx 3.4mm. No mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 87 x 39 mm in size. Left kidney measures 99 x 46 mm in size.
- <u>Ureters</u> Both ureters are not dilated. UVJ 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.
- Bilateral seminal vesicles are seen normally.
- <u>Prostate</u> is normal in size and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

- MILD HEPATOMEGALY WITH FATTY INFILTRATION OF LIVER GRADE-I.
- RIGHT RENAL CONCRETION.

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

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed by Gausiya



*** End Of Report ***