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CMO Reg. No. RMEE 2445133 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name	: Mr.PURSHOTTAM	Visit No	: CHA250041560
Age/Gender	: 24 Y/M	Registration ON	: 08/Mar/2025 08:48AM
Lab No	: 10138855	Sample Collected ON	: 08/Mar/2025 08:48AM
Referred By	: Dr. VANDANA N HOME	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 08/Mar/2025 09:35AM

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.
- <u>Gall bladder</u> is normal in size and shows anechoic lumen. No calculus / mass lesion is seen. GB walls are not thickened.
- <u>CBD</u> is normal at porta. No obstructive lesion is seen.
- **<u>Portal vein</u>** 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 measuring 2.7mm is seen in mid 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 94 x 40 mm in size. Left kidney measures 101 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 measures 33 x 30 x 26 mm with weight of 13 gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

РR

MILD HEPATOMEGALY . LEFT RENAL CONCRETION .

POSSIBILITY OF ACID PEPTIC DISEASE COULD NOT BE RULED OUT .

Clinical correlation is necessary.

[DR. R.K SINGH , MD]

transcribed by: anup

*** End Of Report ***

