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

Patient Name : Mr. UTDIT KUMAR Visit No : CHA250041566

 Age/Gender
 : 36 Y/M
 Registration ON
 : 08/Mar/2025 08:54AM

 Lab No
 : 10138861
 Sample Collected ON
 : 08/Mar/2025 08:54AM

Referred By : Dr. SELF Sample Received ON

Refer Lab/Hosp : CHARAK NA Report Generated ON : 08/Mar/2025 09:34AM

ULTRASOUND STUDY OF WHOLE ABDOMEN

Excessive gaseous bowel shadow.

- <u>Liver</u> is mildly enlarged in size (~ 172 mm) 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.
- **<u>CBD</u>** is normal at porta. No obstructive lesion is seen.
- **Portal vein** 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.
- **Spleen** 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. No calculus or mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 94 x 44 mm in size. Left kidney measures 105 x 48 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/II.

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

Clinical correlation is necessary.

[DR. R.K. SINGH, MD]

Transcribed By: Priyanka

*** End Of Report ***

