

Patient Name	: Ms.SHABNAM	Visit No	: CHA250042825
Age/Gender	: 42 Y/F	Registration ON	: 10/Mar/2025 10:33AM
<b>Lab No</b>	<b>: 10140120</b>	Sample Collected ON	: 10/Mar/2025 10:33AM
Referred By	: Dr.SELF	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 10/Mar/2025 11:17AM

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

Compromised assessment due to excessive bowel gases.

- **Liver is mildly enlarged 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.
- **Gall bladder** is not visualized (post operative).
- **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 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.
- **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 94 x 43 mm in size. Left kidney measures 101 x 42 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 88 x 37 x 36 mm and **shows well defined hypoechoic lesion measuring 16 x 13mm in posterior wall**. Endometrial thickness measures 6.3 mm. No endometrial collection is seen.
- **Cervix** is normal.
- **Both ovaries** are normal in size and echotexture.
- No adnexal mass lesion is seen.
- No free fluid is seen in Cul-de-Sac.

#### **OPINION:**

- **MILD HEPATOMEGALY.**
- **POSTERIOR WALL LEIOMYOMA.**

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

**Clinical correlation is necessary.**

**[DR. R.K. SINGH, MD]**

Transcribed By: Purvi

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

