

Patient Name : Mr.NAJIM AKHTAR	Visit No : CHA250043128
Age/Gender : 19 Y/M	Registration ON : 10/Mar/2025 01:56PM
Lab No : 10140423	Sample Collected ON : 10/Mar/2025 01:58PM
Referred By : Dr.KG1	Sample Received ON : 10/Mar/2025 02:06PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 10/Mar/2025 02:46PM
Doctor Advice : CREATININE,CT UPPER ABDOMEN	



Test Name	Result	Unit	Bio. Ref. Range	Method
SERUM CREATININE				
CREATININE	0.60	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic

*** End Of Report ***



CHARAK



MC-2491

Print.Date/Time: 10-03-2025 18:17:26

*Patient Identity Has Not Been Verified. Not For Medicolegal



Sham

DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
PATHOLOGIST

Dr. SYED SAIF AHMAD
MD (MICROBIOLOGY)

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CECT STUDY OF UPPER ABDOMEN

- **Liver** is grossly enlarged in size (span 225 mm) and shows large number of less enhancing and heterogeneously enhancing space occupying lesions in parenchyma, measuring 5 mm to 30 mm in size. A large heterogeneously enhancing space occupying lesion with central necrotic component is seen in right lobe measuring 117 x 94 mm. Liver surface is irregular in outline. No intrahepatic biliary radicle dilatation is seen. Hepatic veins and IVC are attenuated.
- **Gall bladder** is distended and shows normal lumen. No mass lesion is seen. GB walls are not thickened. (CT is not modality of choice for biliary and gall bladder calculi, USG is advised for the same).
- **CBD** is normal at porta. No obstructive lesion is seen.
- **Portal vein** is occupied by a large thrombus extending from confluence and also involving intrahepatic branches. Splenic vein is patent.
- **Pancreas** is normal in size and shows homogenous density of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is enlarged in size (span 149 mm) and shows homogenous density of parenchyma. No SOL is seen.
- **Both Kidneys** are normal in size and position. No hydronephrosis is seen. No calculus or mass lesion is seen.
- Enlarged & necrotic upper retroperitoneal nodes are seen, largest measuring 25 x 18 mm.
- Moderate ascites is seen.
- Bowel loops are seen normally. No abnormally thickened/edematous bowel loop is seen. No bowel origin mass lesion is seen.

IMPRESSION:

- **MASSIVE HEPATOMEGALY WITH IRREGULAR OUTLINE OF LIVER SURFACE (CHRONIC PARENCHYMAL LIVER DISEASE) WITH LARGE NUMBER OF LESS ENHANCING AND HETEROGENEOUSLY ENHANCING SPACE OCCUPYING LESIONS IN PARENCHYMA WITH LARGE HETEROGENEOUSLY ENHANCING SPACE OCCUPYING LESION WITH CENTRAL NECROTIC COMPONENT IN RIGHT LOBE WITH EXTENSIVE PORTAL VEIN THROMBOSIS WITH SPLENOMEGALY WITH UPPER ABDOMINAL LYMPHADENOPATHY WITH MODERATE ASCITES - METASTATIC MALIGNANCY (?? METASTATIC HEPATO-CELLULAR CA).**

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed by Rachna

*** End Of Report ***



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