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NABLReg. No.MC-2491 Certificate No. MIS-2023-0218

Patient Name : Ms.NEETU KHATRI

Age/Gender : 52 Y/F

Lab No : 10141603

Referred By : Dr.MANISH TANDON

Refer Lab/Hosp : CHARAK NA Visit No : CHA250044308

Registration ON : 12/Mar/2025 08:13AM

Sample Collected ON : 12/Mar/2025 08:13AM

Sample Received ON

Report Generated ON : 12/Mar/2025 09:04AM

ULTRASOUND STUDY OF WHOLE ABDOMEN

Compromised scan due to excessive gaseous bowel shadow & patient fatty body habitus.

- Liver is moderately enlarged in size (~ 184 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.
- Gall bladder 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** 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 borderline enlarged in size (~ 129 mm) 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 45 mm in size. Left kidney measures 94 x 44 mm in size.
- **<u>Ureters</u>** Both ureters are not dilated. UVJ are seen normally.
- <u>Urinary bladder</u> is partially distended with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- **<u>Uterus</u>** is atrophic. Endometrial thickness measures 4.2 mm.
- **Both ovaries** are not visualised.
- No adnexal mass lesion is seen.

OPINION:

- Moderate hepatomegaly with fatty infiltration of liver grade-II.
- Borderline splenomegaly.

(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 ***

