

Patient Name	: Ms.SHAMIM	Visit No	: CHA250044319
Age/Gender	: 60 Y/F	Registration ON	: 12/Mar/2025 08:31AM
<b>Lab No</b>	<b>: 10141614</b>	Sample Collected ON	: 12/Mar/2025 08:31AM
Referred By	: Dr.AVADH KAPOOR	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 12/Mar/2025 11:43AM

**CT WHOLE ABDOMEN**

**NCCT STUDY OF WHOLE ABDOMEN**

Contrast CT not done, in view of increased serum creatinine.

- **Liver** is normal in size, and shows reduced density of parenchyma. No intrahepatic biliary radicle dilatation is seen. Subtle area of altered density is seen in left lobe part of caudate lobe, measuring 87 x 46mm.
- **Gall bladder** is partially distended and shows sludge in 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.
- **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 normal in size and shows homogenous density of parenchyma. No SOL is seen. Splenunculus is seen at splenic hilum.
- **Both Kidneys** are normal in size and position. No hydronephrosis is seen. No calculus or mass lesion is seen.
- **Both** ureters are normal in course and calibre.
- No retroperitoneal adenopathy is seen.
- Gross ascites is seen with irregular peritoneal thickening and omental thickening. Largest measureable omental lesion measures 148 x 62mm in size.
- **Urinary Bladder** is normal in contour with normal lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- **Uterus** is normal in size and shows heterogeneous area in uterine cavity measuring 32 x 24mm. Few myometrial calcifications are seen. No endometrial fluid collection is seen.
- **Cervix** is normal.
- Bilateral adnexal soft tissue space occupying lesions are seen, measuring 78 x 40mm (left side) & 46 x 32mm (right side).
- Opacified bowel loops are seen normally. No abnormally thickened / edematous bowel loop is seen. No bowel origin mass lesion is seen.

**IMPRESSION:**

- **FATTY INFILTRATION OF LIVER WITH SUBTLE AREA OF ALTERED DENSITY IN LEFT LOBE PART OF CAUDATE LOBE (NEOPLASTIC LESION).**
- **GROSS ASCITES WITH IRREGULAR PERITONEAL THICKENING AND OMENTAL THICKENING – PERITONEAL / OMENTAL CARCINOMATOSIS.**
- **BILATERAL ADNEXAL SOFT TISSUE SPACE OCCUPYING LESIONS.**  
D/D (1) BILATERAL OVARIAN NEOPLASMS.  
(2) PERITONEAL BASED PELVIC MASSES.
- **HETEROGENEOUS LESION IN UTERINE CAVITY (NEED TVS CORRELATION).**

ADV: GUIDED FNAC FROM LIVER / OMENTAL MASS

**Clinical correlation is necessary.**

**[DR. RAJESH KUMAR SHARMA, MD]**

Transcribed by Gausiya



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

