

Patient Name	: Ms.KIRAN CHAUDHARY	Visit No	: CHA250044382
Age/Gender	: 69 Y/F	Registration ON	: 12/Mar/2025 09:40AM
Lab No	: 10141677	Sample Collected ON	: 12/Mar/2025 09:40AM
Referred By	: Dr.SUDHIR KUMAR TIWARI	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 12/Mar/2025 06:30PM

TRIPLE PHASE CECT STUDY OF WHOLE ABDOMEN

- **Liver** is enlarged, measuring approx 174 mm in cranio-caudal span, and shows tiny foci of calcification in both lobes - ?calcified granuloma. No intrahepatic biliary radicle dilatation is seen. Hepatic veins and IVC are seen normally.
- **Gall bladder** is not visualized. *Small soft tissue structure with hyperdense foci is seen in gall bladder fossa - ?cystic duct remnant.*
- **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 density of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is normal in size and shows few calcified nodules - ?calcified granuloma. Small nodular mildly enhancing lesion measuring approx 13 x 12 mm is seen near spleen showing tiny focus of calcification within - likely splenunculus / ??calcified lymph node.
- **Right kidney** shows lobulated outline with gross hydronephrosis and abrupt luminal tapering at pelvi-ureteric junction / proximal ureteric region. There is paper thinning of renal parenchyma. No appreciable contrast excretion is seen from right kidney. Few hyperdense foci are seen at all poles with the largest measuring approx 10 x 3 mm seen at lower pole - ?calculi > ?? parenchymal calcification. Right renal artery is narrow in caliber with faint post contrast opacification.
- **Left kidney** is normal in size and position. No hydronephrosis is seen. Few tiny foci of vascular calcification are seen. Few tiny Bosniak type I cortical cysts are seen with the largest measuring approx 7 x 5 mm seen at lower pole.
- **Left ureter** is normal in course and calibre.
- *Few subcentimetric mesenteric and retroperitoneal lymph nodes are seen - insignificant.*
- Tiny para-duodenal diverticulum measuring approx 5 x 6 mm is seen in peri-ampullary region.
- No ascites is seen.
- **Urinary Bladder** is normal in contour with normal lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- *Uterus and ovaries are atrophic (post-menopausal status).*
- Divarication of recti is seen.
- No adnexal mass lesion is seen.
- No free fluid is seen in Cul-de-Sac.
- *Degenerative changes are seen in visualized parts of spine with grade II anterior wedge compression of D12 vertebral body.*



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IMPRESSION:

- HEPATOMEGALY.
- GROSSLY HYDRONEPHROTIC RIGHT KIDNEY WITH PAPER THIN RENAL PARENCHYMA AND ABRUPT LUMINAL TAPERING AT PELVI-URETERIC JUNCTION / PROXIMAL URETERIC REGION AS WELL AS ?RIGHT RENAL CALCULI - ? PUJ OBSTRUCTION / ?? STRICTURE.
- LEFT RENAL CORTICAL CYSTS.
- DIVARICATION OF RECTI.

Clinical correlation is necessary.

[DR. JAYENDRA K. ARYA, MD]

Transcribed By: RACHNA

*** End Of Report ***

CHARAK

