

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003
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CMO Reg. No. RMEE 2445133 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name : Mr.RAJNISH

Age/Gender : 18 Y/M **Lab No** : **10143141** 

Referred By : Dr.HARSHA NURSING HOME

Refer Lab/Hosp : CHARAK NA

Visit No : CHA250045846

Registration ON : 15/Mar/2025 01:24PM Sample Collected ON : 15/Mar/2025 01:24PM

Sample Received ON :

Report Generated ON : 15/Mar/2025 02:25PM

# SKIAGRAM CHEST PA VIEW

- Both lung fields are clear.
- Bilateral hilar shadows are normal.
- Cardiac shadow is within normal limits.
- Both CP angles are clear.
- Bilateral cervical ribs are seen.
- Both domes of diaphragm are sharply defined.

#### OPINION

• NO ACTIVE LUNG PARENCHYMAL LESION IS DISCERNIBLE.

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed By: Purvi







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# CT WhOLE ABDOMEN

PR

## CT STUDY OF WHOLE ABDOMEN PLAIN AND CONTRAST

CT STUDY PERFORMED BEFORE AND AFTER INJECTING [ INTRAVENOUS ] 60ML OF NON IONIC CONTRAST MEDIA AND ORAL ADMINISTRATION OF 20ML CONTRAST MEDIA DILUTED WITH WATER

- <u>Liver</u> is grossly enlarged in size [ span 240mm], and shows normal density of parenchyma. No intrahepatic biliary radicle dilatation is seen. No space occupying lesion is seen. Hepatic veins and IVC are seen normally.
- <u>Gall bladder</u> is normal in size 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 Portal vein is normal at porta.
- <u>Pancreas</u> is normal in size and shows homogenous density of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- <u>Spleen</u> is markedly enlarged in size [ 200mm] and shows homogenous density of parenchyma. Small hypodense areas are seen in splenic parenchyma.
- <u>Both Kidneys</u> are normal in size and position. No hydronephrosis is seen. No calculus or mass lesion is seen.
- Both Ureters are normal in course and caliber.
- No retroperitoneal adenopathy is seen.
- Moderate ascites is seen.
- ullet Bilateral minimal pleural effusion is seen .
- Mild pericardial effusion is seen .
- <u>Urinary Bladder</u> is normal in contour with normal lumen. No calculus or mass lesion is seen. UB walls are not thickened
- Bilateral seminal vesicles appear normal.
- Prostate is normal in size and shows normal density of parenchyma. No mass





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lesion is seen.

• Opacified bowel loops are seen normally. No abnormally thickened / edematous bowel loop is seen. No bowel origin mass lesion is seen.

#### **OPINION:**

- MASSIVE HEPATO-SPLENOMEGALY WITH SMALL HYPODENSE AREAS IN SPLEEN [ ? INFARCTS].
- MODERATE ASCITES.
- BILATERAL MINIMAL PLEURAL EFFUSION .
- MILD PERICARDIAL EFFUSION .

Clinical correlation is necessary.

transcribed by: anup

[DR. RAJESH KUMAR SHARMA, MD]

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



