

Patient Name	: Ms.SAEEDA	Visit No	: CHA250046170
Age/Gender	: 50 Y/F	Registration ON	: 16/Mar/2025 09:40AM
Lab No	: 10143465	Sample Collected ON	: 16/Mar/2025 09:40AM
Referred By	: Dr.RP SHARMA	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 16/Mar/2025 10:50AM

ULTRASOUND STUDY OF KUB

- **Right kidney** is normal in size. No hydronephrosis is seen. **A calculus measuring 6.4mm at mid pole. A well defined cyst is seen measuring 12 x 11mm at mid pole. Cortico-medullary differentiation is hazy. Renal parenchymal echogenicity is raised with lobulated outline.** No scarring is seen. Right kidney measures 95 x 41 mm in size.
- **Left kidney** is normal in size. No hydronephrosis is seen. **A calculus measuring 4.7mm at mid pole.**No mass lesion is seen. **Cortico-medullary differentiation is well hazy. Renal parenchymal echogenicity is raised with lobulated outline.** No scarring is seen. Left kidney measures 92 x 45 mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is normal in contour with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- **Uterus** is post menopausal, measures 71 x 26 x 32mm and shows homogenous myometrial echotexture. Endometrial thickness measures 6 mm. No endometrial collection is seen. No mass lesion is seen.
- No adnexal mass lesion is seen.
- Pre void urine volume approx 169 cc.
- Post void residual urine volume – Nil.

IMPRESSION:

- **RIGHT RENAL CORTICAL CYST.**
- **BILATERAL RENAL CALCULI.**
- **BILATERAL MEDICAL RENAL DISEASE...Adv: RFT correlation**

Clinical correlation is necessary.

{{DR. R.K. SINGH, MD}}

Transcribed By: Purvi



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SKIAGRAM CHEST PA VIEW

- Small fibrotic opacity is seen in right infraclavicular region .
- Rest of lung fields are clear.
- Bilateral hilar shadows are prominent.
- Cardiac shadow is within normal limits.
- Both CP angles are clear.
- Soft tissue and bony cage are seen normally.
- Both domes of diaphragm are sharply outlined.

please compare with previous skiagram.

[DR. RAJESH KUMAR SHARMA, MD]

TRANSCRIBED BY: ANUP

*** End Of Report ***

CHARAK

