

Patient Name	: Mr.MOHD SHAMEEM	Visit No	: CHA250046588
Age/Gender	: 55 Y/M	Registration ON	: 17/Mar/2025 07:39AM
Lab No	: 10143883	Sample Collected ON	: 17/Mar/2025 07:39AM
Referred By	: Dr.WALIULLAH SIDDIQUI	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 17/Mar/2025 08:37AM

ULTRASOUND STUDY OF WHOLE ABDOMEN

Excessive gaseous abdomen

- **Liver** is mildly enlarged in size (~145mm) and shows homogeneous 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.
- **Pancreas** 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 normal in size 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 82 x 37 mm in size. Left kidney measures 91 x 40 mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is partially distended with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- Bilateral seminal vesicles are seen normally.
- **Prostate** is enlarged in size measures 40 x 37 x 32 mm with weight of 25 gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.
- **Pre void urine volume approx. 42cc.**
- **Post void residual urine volume - Nil.**

OPINION:

- **MILD HEPATOMEGALY.**
- **PROSTATOMEGALY GRADE-I.**

(Possibility of acid peptic disease could not be ruled out).

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed by Gausiya

*** End Of Report ***

