

Patient Name : Mr.AZAD SINGH Visit No : CHA250046605
Age/Gender : 32 Y/M Registration ON : 17/Mar/2025 08:21AM
Lab No : 10143900 Sample Collected ON : 17/Mar/2025 08:21AM
Referred By : Dr.ESIC HOSPITAL LUCKNOW Sample Received ON :
Refer Lab/Hosp : ESIC HOSPITAL LUCKNOW Report Generated ON : 17/Mar/2025 04:56PM

MRI: ABDOMEN AND PELVIS

IMAGING SEQUENCES (NCMR)

AXIAL: TruFISP, T1, T2_HASTE Wis. **CORONAL:** TruFISP & HASTE.

Right scrotal sac is small in size. Small T2 hypointense structure measuring approx. 11 x 9 x 6 mm is seen in right scrotal sac – likely epididymis. Right testis is not visualized.

Left testis is normal in size (measuring approx. 41 x 37 x 25 mm), position and signal intensity.

No significant collection is seen in scrotal sac on either side.

Bilateral spermatic cords appear normal.

Liver is normal in size and MR morphology. Margins are regular. No focal lesion is seen. No intrahepatic biliary radical dilatation noted. Portal and hepatic venous channels are within normal limits.

Gall bladder is well distended. Walls are regular and smooth. No definite intramural or intraluminal abnormality seen. CBD is not dilated.

Pancreas is normal in size and MR morphology. Margins are regular. Pancreatic duct is not dilated. No focal lesion is observed. Peripancreatic fat planes clear.

Spleen is normal in size and MR morphology. No focal lesion is observed.

Both kidneys are normal in position and size. No hydronephrosis is noted. Visualized ureters are normal.

Both adrenals are normal.

Bowel: The stomach and other visualized bowel loops are grossly normal. The mesentery and omentum are normal.

Urinary bladder is well distended.

Prostate is normal in size, outline and signal intensity pattern. No focal lesion is seen.

Seminal vesicles are bilaterally normally visualized.

No free fluid is seen in peritoneal cavity.

No significant abdominal or pelvic lymphadenopathy is noted.

IMPRESSION

- **Non visualization of right testis.**
- **No other significant abnormality is detected.**

Please correlate clinically.

DR. RAVENDRA SINGH
MD

(Transcribed by Rachna)



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*** End Of Report ***

