

Patient Name	: Mr.AYAN AHMAD	Visit No	: CHA250046655
Age/Gender	: 14 Y/M	Registration ON	: 17/Mar/2025 09:14AM
Lab No	: 10143950	Sample Collected ON	: 17/Mar/2025 09:14AM
Referred By	: Dr.SHADAB KHAN	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 17/Mar/2025 11:17AM

ULTRASOUND STUDY OF WHOLE ABDOMEN

- **Liver** is normal in size 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 mild sludge in 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 bulky and shows heterogeneous echotexture of parenchyma. MPD is mildly prominent. Multiple pancreatic calcifications & few intraductal calculi are seen measuring upto approx 4.3mm. A hypoechoic cystic lesion of size approx 26 x 21mm is seen in pancreatic head region.
- **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 88 x 37 mm in size. Left kidney measures 93 x 38 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.
- Bilateral seminal vesicles are seen normally.
- **Prostate** is normal in size and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

- MILD GB SLUDGE.
- BULKY AND HETEROGENEOUS PANCREATIC HEAD WITH HETEROGENOUS PANCREAS WITH MILDLY PROMINENT MAIN PANCREATIC DUCT WITH MULTIPLE PANCREATIC CALCIFICATIONS & FEW INTRADUCTAL CALCULI - ? PANCREATITIS(ADV: FURTHER EVALUATION).

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed by Gausiya

*** End Of Report ***

