

Patient Name	: Mr.PIYUSH SRIVASTAVA	Visit No	: CHA250046967
Age/Gender	: 32 Y/M	Registration ON	: 17/Mar/2025 11:59AM
Lab No	: 10144262	Sample Collected ON	: 17/Mar/2025 11:59AM
Referred By	: Dr.KGMU	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 17/Mar/2025 01:11PM

ULTRASOUND STUDY OF WHOLE ABDOMEN

- **Liver is mildly enlarged in size and shows mild coarse 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 prominent (measures 13mm) 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 moderately enlarged 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 85 x 39 mm in size. Left kidney measures 99 x 39 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.
- **Prostrate** is normal in size, measures 31x 31 x 28 mm with weight of 14gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

- **MILD HEPATOMEGALY WITH MILD COARSE ECHOTEXTURE OF LIVER PARENCHYMA WITH MODERATE SPLENOMEGALY ---? CHRONIC LIVER DISEASE WITH PORTAL HYPERTENSION...Adv: LFT and fibroscan.**

Clinical correlation is necessary.

[DR. R.K. SINGH, MD]

Transcribed By: Purvi

*** End Of Report ***

