

CID	: 2124038979	SID	: 177804043468
Name	: MS.GARGI KOLEKAR	Registered	: 28-Aug-2021 / 11:31
Age / Gender	: 29 Years/Female	Collected	: 28-Aug-2021 / 11:31
Ref. Dr	: -	Reported	: 28-Aug-2021 / 13:25
Reg.Location	: Malad West (Main Centre)	Printed	: 28-Aug-2021 / 18:58

## **USG WHOLE ABDOMEN**

### **LIVER :**

**The liver is enlarged in size (16.5 cm), normal in shape and smooth margins. It shows bright parenchymal echo pattern.** The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic lesion seen. The main portal vein and CBD appears normal. **There is evidence of illdefined hypoechoic area noted in segment IV of liver measuring 1.8 x 1.2 cm.**

### **GALL BLADDER :**

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen.

### **PANCREAS :**

The pancreas head and body is visualized and appears normal. No evidence of solid or cystic mass lesion. Rest of the pancreas is obscured due to bowel gas shadows.

### **KIDNEYS :**

Both the kidneys are normal in size, shape and echotexture.  
No evidence of any calculus, hydronephrosis or mass lesion seen.  
Right kidney measures 10.5 x 3.7 cm. Left kidney measures 11.4 x 5.0 cm.

### **SPLEEN :**

The spleen is normal in size (10.5 cm) and echotexture. No evidence of focal lesion is noted.  
There is no evidence of any lymphadenopathy or ascites.

### **URINARY BLADDER :**

The urinary bladder is well distended and reveal no intraluminal abnormality.

### **UTERUS :**

The uterus is anteverted and appears normal. It measures 6.2 x 4.9 x 3.1 cms in size. The endometrial thickness is 6.6 mm.

### **OVARIES :**

Both the ovaries are well visualised and appears normal.  
There is no evidence of any ovarian or adnexal mass seen.  
Right ovary = 2.9 x 2.7 x 1.8 cms (Volume is 7.3 cc).  
Left ovary = 3.1 x 2.9 x 1.9 cms (Volume is 8.8 cc).

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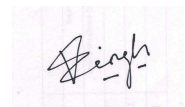
**IMPRESSION :**

**Mild hepatomegaly with grade I/II fatty liver.**

**Focal hypoechoic lesion of liver as described above, likely to be fat spared area.**

**Suggest :- Clinico-pathological correlation.**

**Note:** Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further / Follow-up imaging may be needed in some case for confirmation of findings. Patient has been explained in detail about the USG findings including its limitations and need for further imaging if clinically indicated. Please interpret accordingly. All the possible precaution have been taken under covid-19 pandemic.



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