



PRAKASH HOSPITAL PVT. LTD.

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PH/LH/01/20



DEPARTMENT OF RADIOLOGY

PATIENT NAME :	MR. TRILOK SINGH GULATI	AGE/SEX :	75YRS/M
REFD BY :	DR. MAYANK CHAUHAN	DATE :	29.01.2023
CT NO. :	361	OPD NO. :	2236882

CECT Whole Abdomen:

The abdomen has been imaged by taking axial sequence (5/5mm thickness) from the level of diaphragmatic domes to the level of pubic symphyses.. The bowel was opacified by oral trazograf and then IV contrast given.

Liver is enlarged in size measuring 19.1cm and shows normal CT attenuation. No focal lesion is seen. Intrahepatic biliary radicals and vascular channels appear normal. Portal vein is normal caliber.

Gall bladder is well distended with normal wall thickness. No intra luminal mass is seen. No e/o pericholecystic fluid seen. CBD is normal in caliber and patency (Adv: USG correlation).

Pancreas is normal in size, shape, outline and CT attenuation. No focal parenchymal lesion is seen. Main pancreatic duct is not dilated. No peripancreatic inflammation or collection noted.

Spleen is normal in size and shows homogenous attenuation and enhancement pattern. No focal mass lesion is seen.

Right kidney small in size (7.8cm) with lobulated exophytic heterogeneously enhancing mass lesion of size 3.2x2.4cm seen at mid pole of right kidney with no compression over pelvicalyceal system.

Left kidney is normal in size (8.4cm), shape, attenuation and shows normal excretion of contrast. Cortical thickness is maintained. Pelvicalyceal system is normal. No calculus/mass lesion is seen.

Bilateral ureters are normal in course, caliber and opacification.

Urinary bladder is well distended with there is evidence of lobulated polypoid heterogeneous enhancing hyperdense mass lesion of size 2.5x2.2cm in right lateral wall with surrounding wall thickening. Right V-U junction appears to be compressed by mass lesion, however no obvious hydronephrosis seen.

Prostate is enlarged in size and shows normal CT attenuation. No abnormal enhancement/ mass lesion seen.

Bowel loops are normally opacified with oral contrast and shows normal wall thickness.

No e/o any significant retroperitoneal lymphadenopathy is seen.

No ascites seen.

Advanced degenerative changes seen in L.S. spine.

IMP: Heterogeneous enhancing mass in right kidney & urinary bladder as described above.


DR. RAKESH ROSHAN, MD
CONSULTANT RADIOLOGIST



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TIMINGS : 8.00 AM - 9.00 PM (SUN : 8.00 AM - 1.00 PM) (US, DOPPLERS, DEXA, TMT, ECHO ONLY ON APPOINTMENTS)
HELPLINE & APPOINTMENTS : 9997379997, 9818247755, 9958760504, 0120-4350043, 4350030

Name	: Mr. T.S. GULATI	Ref by.	: Dr. SELF
Registered On	: 28/12/2019 11:41:49 AM	Age	: 72 (Y)

ULTRASOUND REPORT

USG WHOLE ABDOMEN

- Liver noted to be of normal size, angles, outlines & uniform texture with. I/H biliary radicals & venous channels within normal. No focal hepatic/porta or sub phrenic lesion demonstrated.
- Normal cursion of domes with no evidence of pleural effusions.
- Gall bladder is normal in distension, walls, outlines & lumen.
- CHD & CBD noted to be normal in caliber & contents.
- Pancreas & spleen appear normal with no retroperitoneal adenopathy noted. Major vascular trunks are normal.
- Kidneys are normal in site, outlines & cortico-medullary echo-pattern with preserved parenchyma thickness. Approx. size RK:9.24 x 4.76 cm & LK: 9.83 x 5.11 cm with Rt. renal exophytic mid third thin walled cystic lesion of diamt: 1.63 cm & a solid appearing lesion noted in mid third of size:: 2.38 x 2.03 cm with no abnormal vascularity- indicative of Dromedary hump. No renal mass/ calculus disease or back pressure renal/ureteric changes noted.
- No supra or pararenal mass/ lesion noted. No RIF lesion noted.
- Paristaltic bowels noted with no free peritoneal fluid seen.
- U.Bladder is normal in distension, outlines & lumen. PVR: 19.0 ml - insignificant.
- Prostate is enlarged to mean volume 30.6 ml with regular outlines & texture with no definite SOL noted on TAS. No significant bladder neck impression noted. No SOL noted on TAS.

Impression: Rt. renal exophytic mid third simple cortical cystic lesion.

A solid appearing lesion in mid third RK - indicative of Dromedary hump.

Prototomegaly of approx, size 30.6 gm with insignificant PVR.

No any other significant abnormality noted on US scan of abdomen.

END OF REPORT-Lazor Film of 6x2 Spots.

Thanks for the courtesy of referral.

DR. RADHA ROKKAM, DCP
CONSULTANT PATHOLOGISTS (3220)

WISH YOU GOOD HEALTH AND SPEEDY RECOVERY

DR. S. SAHAI, MD
RADIOLOGISTS & SONOLOGIST (DMC-70457)

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