SHRIRAM
DIAGNOSTIC CENTER
SONOGRAPHY, DIGITAL X RAY & CT SCAN

Dr. Ankush N. Balki
MBBS, DMRE (Radiology)
Life member IRIA, SRK member
Reg. No. 2016/05/0111

Name	: Mr. Tukaram Atram	**Age/Sex**	: 76 Years/M
Ref By	: Self	**Date**	: 09 Jun 2023

USG ABDOMEN & PELVIS

- **Liver:** Liver appears enlarged in size (15.3cm) & normal in echotexture. No e/o any focal lesion. IHBR appear dilated (9.5mm).
- **Portal vein:** normal in caliber & flow.
- **Gall Bladder:** Gall bladder is partially distended and showing calculi (3-4) each of size 6mm. CBD appear normal in caliber. Echogenic stent noted in CBD area (18.8mm).
- **Pancreas:** Pancreas appears normal in size and echotexture.
- **Spleen:** The spleen appears normal in size, shape and morphology. No e/o any focal lesion is seen within. The splenic vessels are normal in flow pattern and course.
- **Kidneys:** E/o two calculi each of size 4mm noted at mid and lower pole of left kidney (both are non obstructing)
- **Right Kidney** measures: 10.5 X 4.6 cm. **Left Kidney** measures: 10.4 X 4.6 cm.
  - No e/o calculus/ hydronephrosis/ hydroureter is seen on right side. Corticomedullary differentiation is well maintained on either side.
  - No e/o free fluid/ lymph adenopathy is seen.
  - Excessive bowel gases noted in abdomen.
- **Urinary bladder:** Urinary bladder is partially distended. No e/o mass/ calculus.
  - Prostate appears enlarged in size 38x48x36mm with vol-31.7cm³.
  - Imaged major vessels appear normal.

IMPRESSION:USG abdomen and pelvis reveals (post ERCP for ? periampullary mass distal CBD cholangiocarcinoma)

Cholelithiasis with dilated IHBR.

Hepatomegaly. Echogenic stent in CBD area.

Grade I prostatomegaly.

Left renal non obstructing calculi.

Please correlate clinically
Thanks

DR ANKUSH N. BALKI
M.B.B.S, DMRE

Investigations have their limitation. Solitary pathological/radiological & other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms & other related tests. Please interpret accordingly.

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Datta Meghe Institute of Medical Sciences (Deemed to be University) NAAC Grade A+

ACHARYA VINOBA BHAVE RURAL HOSPITAL

Transforming Lives Through Well Being

A Teaching Hospital of Jawaharlal Nehru Medical College, Sawangi (Meghe), WARDHA-442 004

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DEPARTMENT OF RADIODIAGNOSIS

Patient Name	TUKARAM JAYRAM ATRAM					Age & Sex	70 Years&M
Patient UHID	2300152406		Patient ID	2304250249		Study Date	29-Apr-2023
Patient Type	IPD	Modality	CT	Report Date & Time		30-Apr-2023 11:02:29	
Consulting Dr.	DR. P. BANODE			Referred By	GASTRO WARD		
Study Name	Abdomen^AV_Abd_NEWPORTAL (Adult)						

CECT ABDOMEN

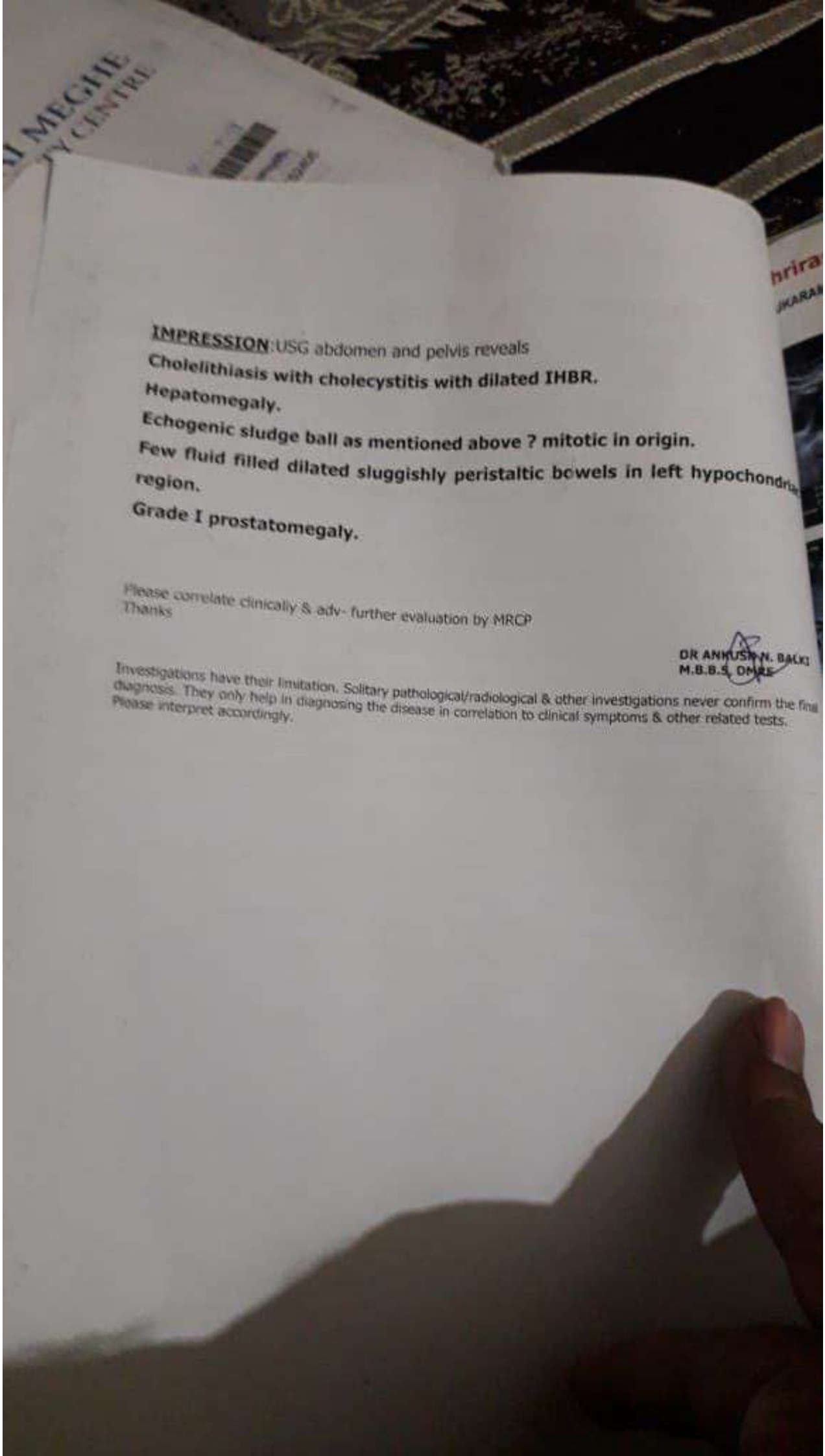
ERCP DONE ON 26TH APRIL 2023: ? IN SUSPICION FOR PERIAMPULLA MASS; PRESENT SCAN REVEALS:

- Pancreatic duct stent and CBD stent seen in situ with air collection consistent with post-operative status. Marked dilatation of intrahepatic biliary radicles.
- PANCREAS – appears bulky throughout its length with surrounding peri pancreatic fluid collection and fat stranding s/o pancreatitis.
- LIVER- measures 18.4cm (Hepatomegaly). Calcific foci of size approx. 6 x 4 mm in segment VI of right lobe of liver.
- Ill-defined area of hypodensity seen in the IVB/V segments of liver parenchyma showing progressive filling of contrast? Hemangioma.
- GALL BLADDER - Gallbladder sludge noted. Correlate with USG. Wall thickness is normal. Pericholecystic fluid collection noted.
- STOMACH -Is well defined, no evidence of wall thickening. The fat planes between the stomach wall and the pancreas appears normal.
- SPLEEN – measures 12.1 cm and is normal in size, shape, axis and enhancement pattern –splenorenal ligament appearing normal.
- KIDNEYS – Hyperdense calculus of size 7 x 4.1 mm seen in the interpolar region left kidney. Few simple cortical cysts noted in the right lower and interpolar region and left lower polar region. Both the kidneys are normal in size, shape and axis. No evidence of any pelvicalyceal dilatation. Cortical phase, nephrographic phase and parenchymal phase all are normal.
- BOWEL- Appears normal.
- URINARY BLADDER – empty.
- PROSTATE- measures approx. 40 cc s/o grade 2 prostatomegaly.
- Bilateral chronic hydrocele (right>left). Few calcific foci seen in left scrotal wall? sequelae to past infection.
- Free fluid noted in pelvis.
- Visualised skeleton shows degenerative changes in the form of bridging osteophytes.
- Visualised lower thorax shows minimal bilateral pleural effusion (left>right).

IMPRESSION: CECT ABDOMEN REVEALS:-

- ACUTE PANCREATITIS (IN CORRELATION WITH RAISED SERUM AMYLASE).
- MARKED DILATATION OF INTRAHEPATIC BILIARY RADICLES WITH PANCREATIC STENT AND CBD STENT IN SITU.

Reg. No. MMC-2006042138



IMPRESSION:USG abdomen and pelvis reveals

Cholelithiasis with cholecystitis with dilated IHBR.

Hepatomegaly.

Echogenic sludge ball as mentioned above ? mitotic in origin.

Few fluid filled dilated sluggishly peristaltic bowels in left hypochondria region.

Grade I prostatomegaly.

Please correlate clinically & adv- further evaluation by MRCP
Thanks

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M.B.B.S, DMRE

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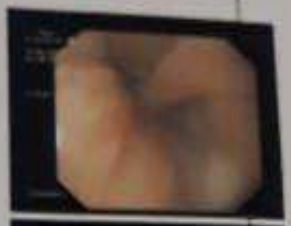
DATTA MEGHE INSTITUTE OF HIGHER EDUCATION AND RESEARCH

Acharya Vinoba Bhave Rural Hospital
Sawangi (Meghe) Wardha - 442001
Phone No - (07152) 254501

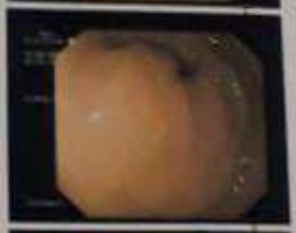
Patient ID: 202309677
Name: Mr. TUKARAM JAYRAM ATRAM
Age: 70 Y
Sex: M
Date: 15-May-2023

Study: Endoscopy
Ref By: Dr. OTE I
Examined By: Dr. Sagar Bothara
Hospital ID: 2301150028

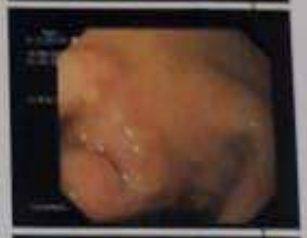
Report of Endoscopy



Indication : Post ERCP patient for PD stent removal

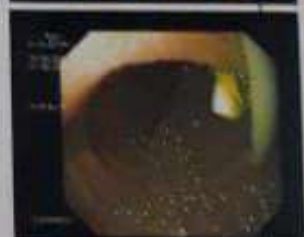


Sedation : Local anesthesia (lignocaine spray)



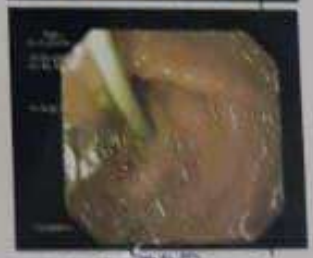
Oesophagus : Normal.

LES : 37CM.



Stomach : Normal.

D1 and D2 : Erythematous ampulla noted. Biliary & PD stent noted in situ. PD stent removed by using Foreign body forceps



Impression : **PD stent Removal done.**

Dr Vijendra Kirnake
MBBS, MD (Med) MNAMS, DNB (Gastro)

Dr Ravi Daswani
MBBS, MD (Med) DNB (Gastro)

Dr Sagar Bothara
MBBS, DNB (Int. Med.) DNB (Gastro)
Asst Professor
Dept. of G... ology
AVBRH, Sawangi (Meghe)

DATTA MEGHE INSTITUTE OF HIGHER EDUCATION AND RESEARCH
Acharya Vinoba Bhave Rural Hospital
Sawangi (Meghe) Wardha - 442001
Phone No - (07152) 254501

Patient ID: 2023040717
Name: Mr. TUKARAM JAYRAM ATRAM
Age: 70 Y
Sex: M
Date: 26-Apr-2023

Study: ERCP
Ref By: Dr. GTE 1
Examined By: Dr. Vijendra Kirnake
Hospital ID: 2304250249

REPORT OF ERCP

Indication: **:C/O obstructive jaudice due to suspected periampullary carcinoma (on CECT Abdomen)**

Anesthesiologist : Dr. Soumya

Sedation : Propofol

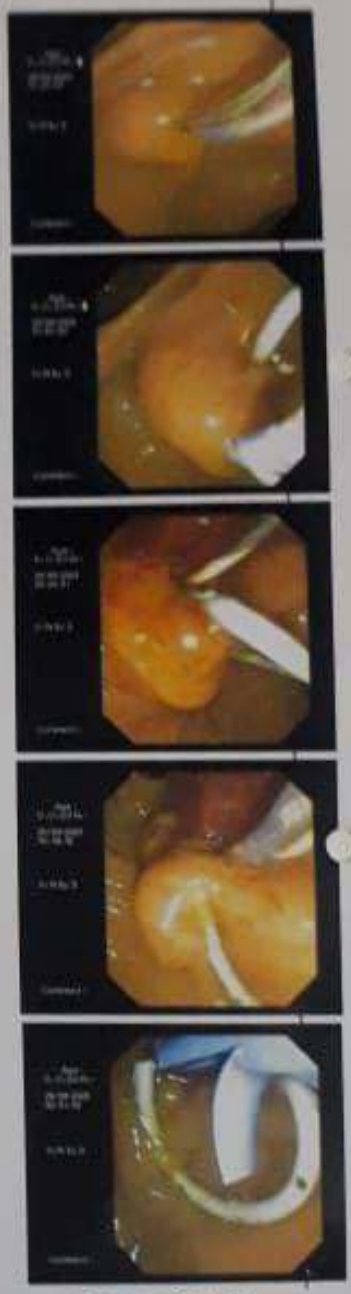
Instrument : Olympus

Procedure Note : SV endoscope advanced into the D2

Esophagus : Visualized mucosa appears normal

Stomach : Pylorus slightly deformed .

Duodenum : Ampulla was bulky, s/o ? ampullary mass. Selective cannulation of CBD tried but due to obstruction guidewire entered into pancreatic duct. Hence 5Fr x5 cm single pigtail PD stent placed prophylactically. Selective cannulation of CBD tried over PD stent but due to obstruction couldnot be achieved. Hence precut fistulotomy was done. Position of guidewire confirmed fluoroscopically into bile duct. Cholangiogram not done in view of underlying cholangitis. Bile aspirated and sent for culture. EPT extended. Brush cytology was taken from bile duct. Over the guidewire 10F x 10 cm straight plastic stent was placed. Drainage white bile was seen with pus flakes.



Impression : ? Ampullary mass/ Distal CBD Cholangiocarcinoma with obstructive jaudice ERCP/EPT/ CBD stenting done PD stent placed Brush cytology obtained

Advice : PD stent removal after 1-2 weeks Metal Stent if inoperable . Review with HPE report

COOK COOK

Dr Vijendra Kirnake
MBBS, MD (Med) MNAMS, DNB (Gastro)

Dr Ravi Daswani
MBBS, MD (Med) DNB (Gastro)

Dr Sagar Bothara
MBBS, DNB (Int. Med.) DNB (Gastro)

Dr. Vijendra D. Kirnake
Gastroenterologist & Hepatologist
Reg. No. MMC - 2006042138

DR.SHRIKANT THAKRE
B.A.M.S.,D.M.L.T.
(B.T.E.Mumbai)

Siddhi

C LI NICAL LAB
(COMPUTERISED)

Timing
Mor: 8.30 a.m. to 2.00p.m.
Eve 6.00p.m to 9.00p.m

Nagpur :-Shop No.2 Raj Jyoti Palace, Kukde Layout Rameshwari Road, Nagpur 440 027 ,,9545171780(wani)
Wani :- Collection centre :- Sai Clinic Wani :- Sunday to friday Mor.:-10 am to 2.00 pm/ eve :- 6 to 8 pm
Mob.No 9766016745(Sat.,, Closed.)

PT'S NAME :- Mr.Tukaram Atram Date : 05.03.23

REF. BY :- Dr.Shirish Thakre MS(Gen.Surg) S.No - 49

**** REPORT ON BIOCHEMISTRY****

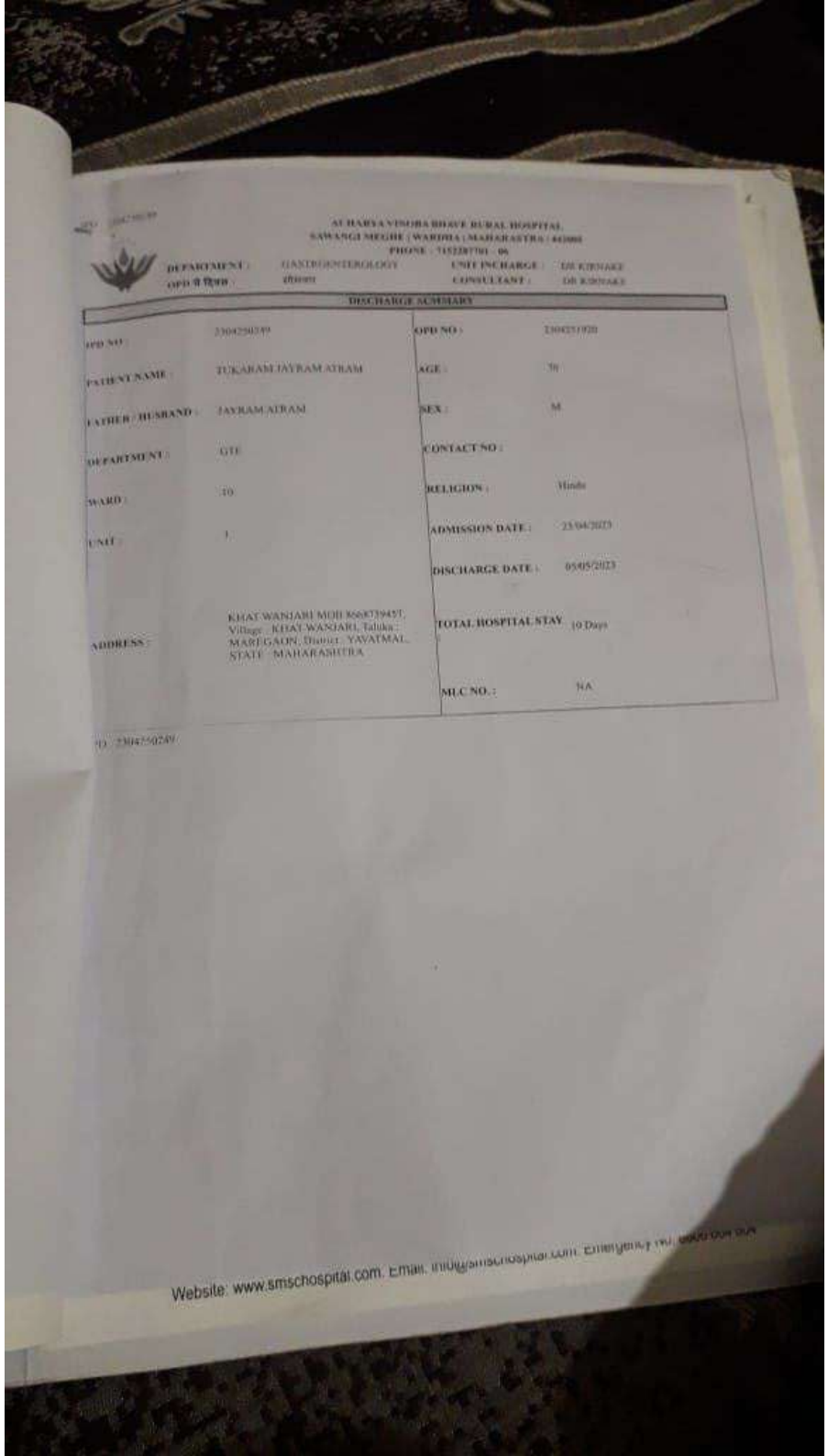
Investigation	Result	Normal Range
Sr.Bilirubin – Total	**14.6** mg/dl	Upto 1.2 mg/dl
Direct	**12.2** mg/dl	Upto 0.3 mg/dl
Indirect	**2.4** mg/dl	Upto 1.0 mg/dl
SGOT	**200** U/lt	05 to 35 U/lt
SGPT	**274** U/lt	09 to 43 U/lt
Alk.Phosphatase	**449** U/lt	40 to 129 U/lt
Random blood sugar	112 mg/dl	70 to 160 mg/dl

Thanks for referral.

Dr.S.R.Thakre

Biochemistry on ERBA CHEM – 5 Plus Autoanalyser.

Collection centre & Service : **Sai Surgical & X-Ray Clinic,Wani.**
(Sunday & Thursday) Dr.Pradeep Thakre DHMS Dr.Shirish Thakre MS(Gen.Surg.)



AT HARYA VISOBA BHAVE RURAL HOSPITAL
SAWANGI MEGHE | WARDHA | MAHARASTRA | 442004
PHONE - 7152287701 - 06

DEPARTMENT : GASTROENTEROLOGY UNIT INCHARGE : DR KINNAKE
OPD नं विभाग : GENERAL CONSULTANT : DR KINNAKE

DISCHARGE SUMMARY

OPD NO :	2304250349	OPD NO :	2304251920
PATIENT NAME :	TUKARAM JAYRAM ATRAM	AGE :	70
FATHER / HUSBAND :	JAYRAM ATRAM	SEX :	M
DEPARTMENT :	GTE	CONTACT NO :	
WARD :	10	RELIGION :	Hindu
UNIT :	1	ADMISSION DATE :	23/04/2023
		DISCHARGE DATE :	05/05/2023
ADDRESS :	KHAT WANJARI MOB 8668739457, Village : KHAT WANJARI, Taluka : MAREGAON, District : YAVATMAL, STATE : MAHARASHTRA	TOTAL HOSPITAL STAY	10 Days
		MLC NO. :	NA

OPD 2304250349