

DATE: 08/03/2024
PATIENT'S NAME : BRAHAM DEV YADAV
AGE / SEX : 80 Yrs./ M
REF BY : NECTAR HOSPITAL
INVESTIGATION : USG WHOLE ABDOMEN

REPORT

- **Liver** is normal size ~14.1 cm showing multiple round echogenic lesions in both lobe likely metastasis. IHBD not dilated. PV normal in course and caliber.
- **Gall bladder** is distended, No calculus, normal wall thickness.
- **CBD** is normal in caliber with clear lumen.
- **Pancreas** is normal in size. MPD is normal in caliber
- **Spleen** is normal in size~ 11.7 cm and normal echotexture.
- **Right kidney** measures ~ 8.6 cm, **left kidney** measures ~8.9 cm in length. Both Kidneys are normal in size and shape. Cortical thickness Normal, Pcs not dilated. Bilateral maintained CMD. Single calculus measuring ~ 6.2 mm in lower calyx of left kidney.
- **Urinary Bladder** wall is mildly trabeculated with internal echoes in lumen. pre void ~ 149 ml post void ~ 66 ml.
- **Prostate** is enlarged in size ~ 73 gm with heterogeneous echotexture.
- Bowel loops appear normal. Right iliac fossa is normal
- No pleural effusion / ascites. No abdominal lymph nodes.

Impression –

- Normal size liver showing multiple round echogenic lesions in both lobe likely metastasis.
- Single calculus measuring ~ 6.2 mm in lower calyx of left kidney. without hydronephrosis
- Grade III Prostatomegaly with heterogeneous echotexture. Needs PSA correlation or biopsy.
- Significant PVR of ~ 66 ml

Thanks for referral.

DR PIYUSH KUMAR
MBBS, DMRD, DNB
RADIOLOGIST



QUANTUM DIAGNOSIS

CENTRE FOR DIAGNOSTIC & INTERVENTIONAL RADIOLOGY

96 Slice CT Scan - NCCT, HRCT, CECT, Triple Phase, CT Angiography, CT Urography PCD PTBD PIGTAIL ICD
2D, 3D & 4D Ultrasound Color Doppler Digital X-Ray EEG ECHO ECG BERA Pathology PFT Barium - Swallow, BMFT, Enema

Name :- BrahmdeoYadav

Age/Sex :- 80Yrs/M

Pt's ID :- 8424

Date :- 09/03/24

Refd By :- Nector Hospital

Thanks for referral.

CT SCAN REPORT OF WHOLE ABDOMEN (ORAL AND IV CONTRAST)

The study reveals:-

There is large lobular and heterogeneously enhancing presacral mass (10 x 8 x 6.5 cm) lying along rectum encasing the same and anteriorly indenting prostate with loss of intervening fat plane. Lesion show multiple patchy necrotic areas infiltration of perirectal fat with multiple nodular and necrotic node and associated fairly large right pelvic node (44 x 36 mm). Proximally rectum appear dilated. Sigmoid colon and descending colon are mildly dilated and fecal loaded. Few enlarged reteroperitoneal nodes are also seen in lower paraaortic region.

Urinary Bladder wall is mildly thickened with catheter bulb.

Liver is enlarged and showing numerous variable size nodular and rounding enhancing SOL largest seen in segment IV. IHBR are not dilated. No abnormality is seen at portahepatis. Portal vein shows normal calibre and enhancement.

GB is mildly distended, no radio dense calculus. CBD is normal

Spleen and Pancreas show normal size with smooth outline, no calcification or focal SOL is seen.

Both adrenals are normal in shape, size, attenuation & enhancement.

Both kidneys show normal size, position with normal attenuation and excretion. Right kidney lower pole show fairly large calculus of approx 12 mm size.

Both ureters are normal in course and calibre.

No ascites or pleural effusion is seen.

Stomach, Duodenum and small bowel show normal wall thickness and are not dilated.

Right lung base show pleural thickening or pleural reaction.

IMPRESSION :-

Large lobular and heterogeneously enhancing presacral mass (10 x 8 x 6.5 cm) lying along rectum encasing the same having necrotic areas and anteriorly indenting prostate with loss of intervening fat plane -- likely exophytic rectal mass. Infiltration of perirectal fat with multiple nodular and necrotic node and associated fairly large right pelvic node (44 x 36 mm). Sigmoid colon and descending colon are mildly dilated and fecal loaded. Few enlarged reteroperitoneal nodes in lower paraaortic region.

Enlarged liver having numerous variable size nodular and rounded peripherally enhancing SOL (40 x 38 x 36 mm) largest in segment IV, suggesting cavitating metastasis.

Right kidney lower pole show fairly large calculus of approx 12 mm size.

Hari

Dr. Hari Kishore Rai.

MD. (Radio-Diagnosis), PMCH Patna.

Consultant Radiologist

Radiologist

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OPINION MUST BE CORRELATED WITH CLINICAL & OTHER INVESTIGATIONS FOR DIAGNOSIS



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NAME : Brahm Dev Yadav

Age : 80 yr Sex : F

Date : 10/03/2023

Consultant Dr. Sahab Kaur

Regn. No.:

Room No.:

DOCTOR'S PROGRESS SHEET

L Ca Refractor

Specimen - (1) Tissue for biopsy

(2) Slide for cytological examination

Dr. Sahab