



श्री शिवाजी मिशन अस्पताल, बारशी

जगदाळे मामा हॉस्पिटल, बारशी.

8806286565, 8806286767

Pt. Name: Sangita Miragane Date: 21/11/2024

Ref. by Dr. Dr. Shivaji Sadekar

Ward Name: (H1)

IPD No.

44/F

Ex

9021559955

Adv. -

A1464038

50-018

Specimen for HPR
Uterus, Cx, Bil. Fallopian
& Bil. ovaries tubes

Dispensed

Date

Pharmacist

Name of Pharmacy City

श्री शिवाजी मिशन अस्पताल, बारशी
कर्मवीर जगदाळे मामा मेडिकल स्टोअर्स
जगदाळे मामा हॉस्पिटल, बारशी



NAME	Mrs SANGITA MIRGANE	AGE	46 Years
REF. BY	Dr. SHIVAJI SADEKAR SIR	GENDER	FEMALE
DATE	07/11/2024	PATIENT ID	BIC/711/2024-2025/5293

USG ABDOMEN AND PELVIS

LIVER

Size- normal
Shape- normal
Surface- no obvious surface irregularity noted at present.
Parenchyma- homogenous and normal.
Focal lesion- nil
Segmental anatomy- maintained.
Porta hepatis- appear normal.
Vascularity- hepatic veins and portal vein appear normal. No obvious portal vein thrombosis seen at present.
IHBR & CBD- CBD appears normal. No IHBR dilatation seen at present.

Gall bladder appears well distended and normal. no obvious periGB collection seen at present.
Spleen appears normal in size and echo.
Pancreas appears normal in size and echo.
Retroperitoneum, aorta is visualized normal.

KIDNEYS

RK : 11.4 cm x 3.8 cm.
LK : 11.2 cm x 3.7 cm.
Size- normal
Position- normal
Mobility- shows normal movement with respiration
Contour- maintained
Renal capsule- normal.
Parenchymal echo - normal.
Central echo complex- renal sinus appears normal.
Medullary pyramids appear normal.
Adjacent structures- renal pelvis, renal artery and vein, perirenal space appears normal on both sides.
No evidence of renal vein thrombosis noted on either side.
No calculus seen on either side at present.
No hydronephrosis seen on either side at present.
Both ureters are not dilated and not seen.
Bilateral ureteric jet appears normal.

BLADDER EVALUATION

Bladder Wall

Thickness - normal 3.0 mm
Trabeculations- not seen
Focal masses - no obvious focal lesion seen at present.
Diverticula- no obvious diverticulum seen at present.
Bladder Base
ureteric orifices & intramural ureter- normal.
ureterocele- not present/not seen
bladder neck- normal, no obvious stricture or focal dilatation seen
base elevation- absent
Bladder Volume
prevoid- 208 cc post void - 11 cc (Insignificant).

UTERUS

Uterus is anteverted and Bulky measures 11.6 cm X 5.7 cm X 5.7 cm

Uterus shows coarse echotexture.

4.4 x 3.9 cm sized ill defined heterogenous lesion is noted fundus posteriorly. It is causing indentation on endometrial cavity. It shows minimal vascularity on doppler. This is most likely suggestive of focal adenomyosis? fibroid.

Endometrial cavity is central and thickened measures ET- 18 mm. It is heterogenous and shows few cystic areas within. No e/o vascularity at present scan.

No obvious focal lesion or intrauterine gestational sac seen within it.

CERVIX-

Cervix appears normal.

No obvious focal lesion seen within cervical canal.

OVARIES-

Both ovaries appear normal. Both ovaries show multiple small follicles.

ADNEXA

Both adnexa appear clear.

No adnexa mass or pathology seen.

No obvious free fluid/collection seen in POD at present.

GI TRACT

O-G junction appears normal.

Stomach- appears distended and filled gas and food particles.

Duodenum- second part of duodenum appears fluid filled and gas distended.

Jejunum- appear normal.

Ileal loops- appear fluid filled and show normal peristalsis.

Terminal ileal loops appear normal. No obvious wall thickening noted at present.

COLON

ICJ, caecum, Ascending colon, transverse colon and Distal descending colon show gaseous distention.

No ascites/free fluid noted within peritoneal cavity.

Bilateral inguinal hernial sited appear normal.

No obvious herniation of bowel loops or omentum seen on either side even on coughing.

SMA, SMV relation appears normal.

Appendix appears normal measures 3.8 mm.

IMPRESSION:-

- BULKY UTERUS WITH COARSE ECHOTEXTURE.
- ENDOMETRIAL HYPERPLASIA.
- FOCAL ADENOMYOSIS ? FIBROID AS DESCRIBED ABOVE.
- LIVER, SPLEEN AND KIDNEYS APPEAR NORMAL AT PRESENT SCAN.

Please correlate Clinicopathologically.

Dr. Ratnamala R. Jadhav-Burgute
MBBS, DMRE (2005/07/3044)

(Thanks for referring patient)

Dr. Ratnamala R. Jadhav
MBBS, DMRE
Reg. No. - 2005/07/3044