



SHANYA SCANS & THERANOSTICS

CIN NO.: U85100UP2020PTC128218

Diagnostics | Interventions | Therapies

BIGGEST DIAGNOSTICS & THERANOSTICS CENTER IN UTTAR PRADESH

NAME	SHIV KUMAR PAL	AGE/SEX	45 Y/M	DATE	08-04-2025
UHID	SAN257483	REF BY	AXIS HOSPITAL		

CECT WHOLE ABDOMEN

Clinical History: Attempted case of cholecystectomy (previous records not available).

FINDINGS:

Gallbladder is partially distended/contracted with marked pericholecystic fat stranding and heterogeneity of the omentum. Planes with adjacent hepatic parenchyma are focally blurred. Planes were duodenum and hepatic flexure are relatively preserved. No significant enlarged retroperitoneal lymph nodes are noted at present scan. CBD is not dilated. (Note- Hypodense biliary calculus can't be seen on CT scan, MRI/USG are choice of modality).

Free air is noted within the abdominal cavity suggestive of pneumoperitoneum.

Liver is normal in size. Margins are regular. Parenchyma shows normal and uniform attenuation values. There is no intrahepatic biliary dilatation. No focal lesion is seen. Hepatic veins and portal vein are normal.

Pancreas is normal in size. Margins are regular. Parenchyma shows normal and uniform density. Pancreatic duct is not dilated. No focal area of altered density or calcification is seen. Peripancreatic fat planes are preserved.

Spleen is normal in size. Margins are regular with uniform parenchymal density.

Adrenals: Both adrenals are normal in size, shape and enhancement.

Kidneys: Both kidneys are normal in position and size. Margins are regular. Parenchymal thickness is adequate with normal nephrographic density. No evidence of backpressure changes seen in the pelvicalyceal system. Few cortical cysts in both the kidneys largest measuring 3.3 x 3.1 cm. Few small concretions are seen in the left kidney largest measuring approximately 1 mm involving the mid pole of left kidney.

Both ureters are seen in their entire extent displaying normal course and calibre.

Urinary bladder is well distended. Wall thickness is normal. Perivesical fat planes clear.

Prostate is normal in size, shape and shows regular outline. No focal lesion seen.

Bowel: Most of the large bowel loops and small bowel loops are collapsed. Large bowel loops predominantly faeces filled. No abnormal dilated bowel loops are seen on present scan.

No free fluid is seen in the peritoneal cavity.

• Digital PET-CT • GAMMA Camera • Theranostics • Radiodiagnosis • Pathology Services • Fetal Medicine • Fetal Echo • Interventions • Cardiac Imaging • Neuro Imaging • Dental Imaging



Plot No. TC-49, V-VIII, Opp. Lohia Hospital Aadhar Building, Vibhuti Khand, Gomti Nagar, Lucknow

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**SAMPLE
COLLECTION
WITHIN 60 MIN
GUARANTEE**

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IMPRESSION: -

- Partially distended/contracted gallbladder with marked pericholecystic fat stranding and heterogeneity of the omentum and focally blurred adjacent hepatic parenchyma-Planes and other findings are described above—? Chronic Cholecystitis-/? Early neoplastic/? Nature. Advised MRCP and further evaluation.
- Free air within the abdominal cavity suggestive of pneumoperitoneum-? Post attempted surgery.
- Few bilateral simple renal cortical cysts (Bosniak type I).
- Few left renal small concretions.

Please correlate clinically.

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*Transcribed by Preeti Singh**Kindly note: Please intimate us for any mismatch of credentials / typing errors and send the report for updation within a week.*

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