

22

Midas Scan

Service Requisition Slip (SRS)

| | | | | | | |
|------------|---|----------------------|--------------|---|------------------|-----------------------|
| Lab No | : | 012507040051 | Name | : | Mr.SANJAY SHUKLA | 50 Y 0 M 0 D / Male |
| Mobile No | : | 7388218410 | Ref. Doctor: | : | Dr.S K PANDEY | |
| Read. Date | : | 04-Jul-2025 15:56:03 | Balance | : | 0.00 | Paid Amount : 3120.00 |

Remark:

ULTRASONOGRAPHY
USG Guided Diagnostic Aspiration

Sample Collected By

Signature
FMC from Dr. S K Pandey

16/6/25

30.6/25

Car & Clam

075 210

Polromber

~ a mile 400 BTR

midas

Kenley Gulera
malignant

if possible, needle

FRALS

JS

डा० पाण्डेय एस० के०
Dr. Pandey S.K.

B.Sc, MBBS, MS. (Surgery), LM.S. (BHU)
Dip. MAS, FMAS, FAGES, FAIS

General & Laparoscopic Surgeon
Regd. No. 32592

LIFE MEMBER :

- Indian association of Gastro endo surgeons (I.A.G.E.S.)
- Association of Minimal Access Surgeons of India (A.M.A.S.I)
- Society of Endoscopic & Laparoscopic Surgeons of India (S.E.L.S.I)
- Indian Association of Surgical oncology
- Association of surgeons of India (A.S.I)
- Indian Medical Association (I.M.A.)
- Associate Member of Urological Society of India



रजिस्ट्रेशन हेतु सम्पर्क करे ☎ 6393271416
9129704704

निर्मल हॉस्पिटल एवं
लैप्रोस्कोपिक सर्जरी सेन्टर
साकेत नगर, निकट सी.एम.ओ. आफिस
जेल रोड, रायबरेली

Mob: 9415034033 (Dr.)
e mail: drskp4@yahoo.com

SUNDAY CLOSED

रविवार अवकाश

Date 6/6/25

Pt. Name Sanjay Shukla Age 58 Sex M Weight 43 kg

X-RAY

USG of Abdomen

Haemogram

TLC

DLC

Hb%

Urea

Sugar

Creatinine

LFT

Serum Amylase, Lypase

Serum Electrolytes

HIV

HBSAg

HCV

ECG & Cardiac Checkup

Urine R/M

CT abd
midium
Sundrayar

M/O. GB. A. U.

operation in

Supraumbilical

Ty & Tgm for Echinococcus

MY

Bandy 400

OD x 200

ca yard on

7/7/25

Dr. N. S. S. S.



midas

Scans and Labs

Add: Lower Ground Floor, BDS Complex, Opposite City Complex,
Kutchery Road, Raebareli
Mob: 9559282288, 9519282288

| | | | |
|-----------|-------------------|-------------|--------------|
| Name: | Mr. SANJAY SHUKLA | Age/Gender: | 50 Y/M |
| Ref. By : | Dr. S K PANDEY | UHID: | 012506060056 |
| Date: | 06-Jun-2025 | Patient Id: | 9880226 |

CECT: WHOLE ABDOMEN

Thin slices were obtained to scan abdomen after administering I.V. contrast.

Liver is normal in size. There is no intrahepatic biliary dilatation. Hepatic veins and portal vein are normal. A large solid-cystic exophytic mass lesion with thick enhancing septations and ill-defined margins in segment III of left lobe of liver measuring 16.7x10.2x9.9cm. The mass lesion shows a dependant calcification in cystic component and invading into anterior abdominal wall in midline & shows loss of fat planes with a small bowel loop.

Gall bladder is well distended and shows multiple hyperdensities in its lumen largest measuring 11.2x8.6mm suggestive of calculi. Walls are regular & smooth. CBD is not dilated.

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.

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

Bowel: The stomach and other opacified bowel loops are normal. The mesentery and omentum are normal.

Note made of linear tubular structure in contrast opacified small bowel loops-possibility of Gut worm.

Retroperitoneal major vessels are normally visualised. No significant retroperitoneal lymphadenopathy is observed.

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

Prostate is apparently normal with regular outline.

Mild free fluid in pelvis.

IMPRESSION:-

- Cholelithiasis.
- A large solid-cystic exophytic mass lesion with thick enhancing septations and ill-defined margins in left lobe of liver as described above- possibility of hydatid cyst.
- Mild free fluid in pelvis.
- Note made of linear tubular structure in contrast opacified small bowel loops-possibility of Gut worm.

Adv:- Serum antigen test /Histopathological correlation

Transcribed by rakesh


Dr. MANVENDRA SINGH
MBBS, DNB
RADIOLOGIST
Reg. No. 67559

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First National Diagnostic chain to have 100% of its labs with NABL Accreditation

NAME : SANJAY SHUKLA (50Y/M)
REF. BY : DR SK PANDEY
TEST ASKED : ECHINOCOCCUS - IGG

SAMPLE COLLECTED AT :
(2290011682), NIRMAL HOSPITAL AND
LAPAROSCOPIC SURGEON CENTRE, SAKET NAGAR,
NEAR CMO OFFICE JAIL ROAD, RAEBARELI, UTTAR
PRADESH 229001, 229001

| TEST NAME | TECHNOLOGY | VALUE | UNITS |
|--|------------|-------|-------|
| ECHINOCOCCUS - IGG Bio. Ref. Interval. :- | E.L.I.S.A | 1.94 | NTU |

Negative : < 9
Equival : 9 - 11
Positive : > 11

Clinical Significance:

Echinococci are microscopic cestodes. Echinococcus infection cause symptoms in the affected organ. Infection in humans can cause parasitic tumors in liver, lungs, brain, Positive results imply immunity or previous exposure to Echinococcus.

Specification:

Sensitivity: 98.82 %, Specificity: 97.22%, Intra Assay Precision: 8.00% (%CV), Inter Assay Precision: 6.61% (%CV)

Kit Validation Reference:

Gottsen, Bruno (1985): Molecular and immunological diagnosis of Echinococcus , Clin. Microbial, Rev 5(3), pp. 248-261, DOI: 10.11281 CMR 5:3.248

Please correlate with clinical conditions.

Method:- Solid Phase Enzyme Immunoassay

~~ End of report ~~

Sample Collected on (SCT) : 30 Jun 2025 19:32

Sample Received on (SRT) : 01 Jul 2025 15:51

Report Released on (RRT) : 01 Jul 2025 21:27

Sample Type : SERUM

Labcode : 0107001083/PU123 Dr Renuka MD(Path)

Barcode : EE897277

Dr Arshiya MD(Path)

Page : 1 of 2

Scan QR code to verify authenticity of reported results; active for 30 days from release time.