



Patient Name	: G KAVITHA 28YF	Gender	: Female
Age	: 28 Y	Date	: Jun 21, 2025
Referring Doctor	: SWAPNA	Patient ID	: UPL34028

MRI ABDOMEN AND PELVIS

PROCEDURE:

Multiplanar MRI of abdomen and pelvis was performed with T1WI, T2WI, DWI and fat suppressed imaging.

FINDINGS:

LOWER PLEURAL SPACE:

There is no pleural effusion.

PERITONEUM:

There is no free fluid in peritoneal cavity.

LIVER:

Liver is normal in size with normal contour and smooth surface. It shows normal signal pattern. No evidence of any focal parenchymal lesion.

Intrahepatic biliary radicles are not dilated. Structures at porta are within normal limits.

GALL BLADDER:

Gall bladder is physiologically distended and shows smooth wall. No evidence of any filling defect. No evidence of any mass lesion in gall bladder fossa. Pericholecystic fat planes are normal.

BILE DUCTS:

Right hepatic duct, left hepatic duct, common hepatic duct and common bile duct appears normal. No evidence of any filling defect noted.

PANCREAS:

Pancreas is normal in shape, size and contour. It shows normal signal intensity. No evidence of any focal lesion. Pancreatic fat planes and vascular structures are normal. No evidence of any pancreatic calcification.



SPLEEN:

Spleen is normal in size with normal contour. It shows normal signal pattern. No evidence of any focal lesion noted. Structure at splenic hilum are within normal limits.

ADRENALS:

All the three limbs of adrenal glands are well outlined. There is no focal thickening in any of its limb.

KIDNEYS:

Bilateral kidneys are normal in shape, size, outline and position. They show normal signal pattern. No evidence of any hydronephrosis. Perirenal fat planes are within normal limits.

URINARY BLADDER:

Urinary bladder is distended without any focal wall abnormality. No evidence of any papillary growth or intravesical abnormality. Perivesical fat planes are normal.

UTERUS AND ADNEXA:

Gravid uterus noted with single intrauterine foetus with cephalic presentation at present scan.

Placenta is located along posterior uterine wall.

Internal os is closed at present. Cervical length measures about 4.7 cm.

Bilateral adnexa appear normal. No evidence of any solid & cystic lesion on either side.

RETROPERITONEUM:

No evidence of any retroperitoneal lymphadenopathy or mass lesion. Retroperitoneal fat planes appear normal.

MISC:

Gut loops reveal no significant abnormality.

A medium sized lobulated T1 and T2 hypointense soft tissue lesion noted involving rectus abdominis muscle on right side in lower abdomen measuring about 4.7 x 2.1 cm. No evidence of any invasion within peritoneal cavity. Overlying subcutaneous plane appears normal.

Similar lesion is also noted involving rectus abdominis muscle on left side at same level measuring about 3.1 x 0.8 cm.

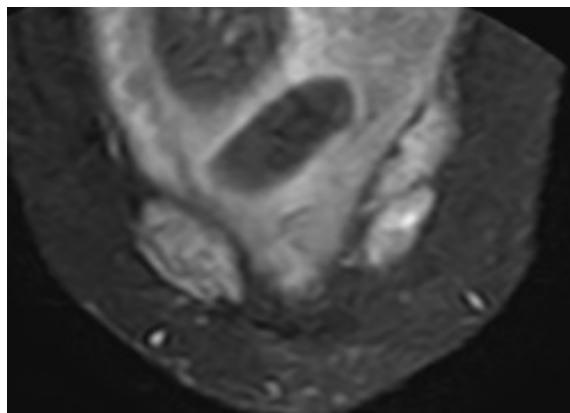


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IMPRESSION:

- A medium sized lobulated T1 and T2 hypointense soft tissue lesion involving rectus abdominis muscle in lower abdomen on either side as mentioned. Possibility of benign neoplastic lesion of mesenchymal origin like desmoid tumour appears likely. Contrast study and FNAC correlation is suggested.
- Gravid uterus with single intrauterine foetus.



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