



SHRI SIDDHIVINAYAK DIAGNOSTIC CENTRE

Near HDFC Bank, Daund-Patas Road, Daund, Dist. Pune - 413801. Mo. : 9028760100, 9028992600

Patient Name :	GAYATRI MADEKAR	Age / Gender :	50Y / F
Patient ID :	7592	Date & Time :	01-09-2025 06:21 PM
Refd By :	DR RAHUL JAGDALE	Modality :	CT

CT ABDOMEN AND PELVIS (PLAIN AND CONTRAST)

FINDINGS:

Liver is enlarged due to lesions in right lobe.

Ill defined hypodense lesions involving almost all segments of right lobe liver is seen. There is fairly homogeneous enhancement of lesion with central hypodensity in larger lesion on delayed phase. Larger lesion measures 151 x 117mm. No intrahepatic biliary radical dilatation. Subphrenic spaces are normal. CBD is not dilated.

Gall bladder is not visualized.

Pancreas is normal in size and attenuation. No pancreatic calcification noted. Pancreatic duct is not dilated. No focal lesion. Peripancreatic fat planes are normal.

Spleen is normal in size and attenuation. No focal lesion.

Normal adrenal glands are seen. No focal lesion.

Both the kidneys are normal in size, shape, contour and parenchymal attenuation and show similar and simultaneous contrast opacification and excretion. Surface is smooth. No dilatation of pelvicalyceal system. No calculus or mass. Perinephric spaces are normal.

Ureters are not dilated.

Urinary bladder is normal. No calculus or mass seen in the bladder.

Uterus is normal in size. No focal lesion.

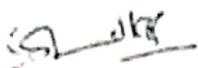
Ovaries are not seen. No adnexal mass lesion.

P.T.O

Stomach and bowel loops grossly are normal. No obvious abnormality of mesentery and omentum. IVC, aorta and para-aortic regions appear normal. No lymphadenopathy. No ascites. No pleural effusion. Soft tissue and bones appear normal.

CONCLUSION:

- Ill defined hyposense lesions involving almost all segments of right lobe liver. There is fairly homogeneous enhancement of lesion with central hyposensity in larger lesion on delayed phase. Larger lesion measures 151 x 117mm. -- Likely are malignant neoplastic lesions.



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M.B.B.S., D.M.R.E.

Consulting Radiologist
Reg. No : 2012/06/1871

Patient name	Mrs. GAYATRI MADEKAR	Age/Sex	50 Years / Female
Patient ID	CRD114041	Visit No	1
Referred by	Dr. RAHUL JAGDALE PATIL	Visit Date	29/08/2025

Exam : **ULTRASONOGRAPHY OF THE ABDOMEN & PELVIS.**

Moderate hepatomegaly is noted. The right lobe of liver measures 19.9 cms in long axis in the mid axillary line. The liver shows slightly coarse echotexture. There is a large heterogeneous mass of size 17.5 x 12.9 x 11.7 cms (Volume - 1402 cc) seen in the right lobe of the liver with cystic / necrotic component within. The mass shows internal vascularity. The intrahepatic biliary & portal radicles are normal. The portal vein and CBD appear normal.

The gall bladder is not optimally visualised ? collapsed.

The pancreas is normal in size [Head : 1.9 cms ; Body : 1.1 cms ; Tail : 1.7 cms] with normal echotexture. No mass or calcification noted.

The spleen is normal in size (9.3 cms) & echotexture. The splenic vein is normal in course & calibre.

The right kidney measures 9.0 x 4.2 cms. The left kidney measures 9.9 x 4.9 cms.

Both kidneys are normal in size, shape, position & echotexture. There is no e/o hydronephrosis or mass in either kidney. The cortical thickness is well maintained in both kidneys.

The urinary bladder distends well and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is of normal thickness.

The post menopausal uterus is small and atrophic. Both ovaries are not localised. No adnexal mass is noted.

Gaseous distention of the entire large colon.

The mucosal layer of the antral part of the stomach appears minimally thickened and hypoechoic.

No evidence of any abnormal, tubular, non-compressible, aperistaltic structure noted in the RIF.

No evidence of pleural effusion is noted in bilateral pleural spaces. No evidence of free fluid in the abdomen at present.

OPINION:

- * A large heterogeneous mass of size 17.5 x 12.9 x 11.7 cms (Volume - 1402 cc) is seen in the right lobe of the liver as described - further evaluation is suggested to rule out neoplastic etiology like hepatocellular carcinoma.
- * Moderate hepatomegaly with slightly coarse hepatic echotexture.
- * Evidence of mild gastritis.
- * No evidence of pleural effusion is noted at present.
- * Gaseous distention of the entire large colon.
- * No other significant abnormality noted in the study.

Triple phase CECT Abdomen is suggested for further evaluation.

Other suggested investigations - Hepatitis virus panel, LFT, BSL, LFT, Sr. Alpha- fetoprotein, Haemogram, RFT and Urine routine.

DR. ASHWIN JAGDISH WALKE

MBBS, DMRE

DR CHAITANYA JOSHI

REG. NO. 2012/06/1871

DR ASHWIN WALKE



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Patient name: Mrs. GAYATRI MADEKAR
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