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Reg. No. : S-683	Printed On : 30-04-2019 - 02:15 P
Registration Date : 29-04-2019 / 05:47 PM	Age/Gender : 35Y / F
Patient : Ms NANCY DHUNNA	
Referred By : Dr Asim Iqbal	

## N.C.C.T. KUB

CT Scan carried out on TRUE Multi detector 500slice scanner.

NCCT examination of the KUB region was carried out. Images recorded and evaluated at appropriate window settings. This examination is limited for the evaluation of solid organs and vascular structures due to lack of I.V. contrast, which is standard for urinary calculus assessment CT.

### Clinical history: Fever.

Bilateral adrenals are normal in size & outline.

Right kidney measures 91 x 29mm. It shows lobulated outline and significant thinning of parenchyma at upper and mid pole with suggestion of hypertrophy of parenchyma at lower pole. A small cyst of size 14mm is noted at upper polar region. There is suggestion of another smaller cyst at mid pole. Parenchymal thickness at mid pole is 5.5mm. No renal calculus is seen. Right pelvicalyceal system is compact. Right ureter is normal in course and caliber.

Left kidney measures 121 x 45mm. It shows lobulated outline with cortical scar at mid pole. No renal calculus is seen. Upper pole shows thickened parenchyma. There is suggestion of a heterogenous (?partially cystic) lesion of size ~40 x 36mm at lower pole. No calcification / fat density seen. Left pelvicalyceal system is compact. Left ureter is normal in course & caliber.

No evidence of any calculus seen in the KUB region.

The urinary bladder appears normal. The bladder wall appears normal. No calculus seen in the urinary bladder.

The uterus appears normal for age. No adenexal mass seen.

Mild free fluid is seen in pelvis.

No enlarged lymphnodes are seen.

No abnormal bowel wall thickening/dilatation seen.

**IMPRESSION: Relatively small right kidney with significant thinning of parenchyma at upper and mid pole and suggestion of hypertrophy at lower pole. Two small cysts are seen in right kidney.**

**- Compensatory hypertrophy of left kidney with lobulated outline and cortical scarring at mid pole. There is suggestion of a heterogenous (?partially cystic) lesion at lower pole of left kidney.**

**Please correlate clinically.**

*Nancy Dhunna*

*Dr. Ujjwal Saxena*  
Consultant Radiologist  
DMC Reg. No. 03287

-- End of Report --

Report typed by drujwal

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If test results are alarming or unexpected, please contact centre immediately for possible remedial action.