

Dr MANIESH KUMAR
 MBBS, MS, DNB
 (Urologist)
 Call : +91-9838000025 (M)



Annexure-4

Dr MAMTA BHURA
 MBBS, MD, (Skin & VD)
 Dermatologist & Cosmetologist
 Call : +91-9838000024 (M)

→ Urologist → Andrologist → Kidney Transplant

09/10/21

MRS RENU
35/F

- Pain @ Rib cage / *CSF* - *CSF* - *CSF* 3 mm connection
 ↓
 -) ① + ECGOAY-MRI BD } 5d
 -) ② + POMEZ-OR (BD)
 -) ③ + ~~XXXXXX~~ Path has 1BD x 10d
 -) ④ + acm (to B PD x 15d

No 15 days

Dr. Maniesh Kumar

Chief-Urologist
 ★ Krishna Hospital
 ★ Leela Mani Hospital

Asst. Professor
 GSVM Medical College, Kanpur
 Ex-consultant : Kaya Skin Clinic, New Delhi

Add.: Bungalow No.4 - 113/196, Swaroop Nagar, Kanpur (Behind Royal Cliff, Near Dominoz)
 Plz. Take Prior Appointment on Phone : 9235460024 (B/W 8 a.m. to 8 p.m.)

Not for Medico-Legal Purpose
 Valid For 7 Days



ALOK DIAGNOSTICS

IMAGING, PATHOLOGY & BIOPSY CENTRE

4D Ultrasound • Colour Doppler • Echo • Digital X-Ray • Pathology • Biopsy

113/24-B, Inderjeet Jain Marg, Lane Next to Police Station, Swaroop Nagar, Kanpur • Mob.: 7052151801

Dr. Alok Kumar Sinha

MD Radiodiagnosis, PDCC (SGPGI)

Dr. Supriya Katiyar

MD Pathology, (K.G.M.U.), Lucknow

Patient Name : Mrs. Renu Singh	Date: October 9, 2021
Referred By : Dr. Gautam	Age / Sex: 35 Yrs. / F
Investigation : Ultrasound Whole Abdomen	

OBSERVATION

Liver Normal in size (~ 14.3 cm), shape and echogenecity. No evidence of any focal lesion. Intra Hepatic Biliary Radicals not dilated. Hepatic veins are normal in course and caliber.

Portal vein is normal in course and caliber.

GB Normal in distension and wall thickness. No evidence of any sizeable calculus or mass lesion.

CBD is normal in course, caliber and clear throughout it's course.

Pancreas Normal in size, shape with diffuse fatty infiltration. No evidence of any sizeable mass lesion. Main Pancreatic duct not dilated.

Spleen Normal in size (~ 8.3 cm), shape & echogenicity. No evidence of any focal lesion. Splenic vein at hilum is normal.

Retroperitoneum

No evidence of sizeable retroperitoneal lymphadenopathy. Visualized segment of aorta and IVC normal.

Right kidney Right kidney is normal in size (~ 8.5 x 3.7 cm), shape, position and echogenicity. CMD is normal. Pelvicalyceal system not dilated. No evidence of any calculus or mass lesion. Right ureter is not dilated in visualized part with obscured part of it.

Left kidney Left kidney is normal in size (~ 8.4 x 3.5 cm), shape and echogenicity with relative medial / inferior location. CMD is normal. Pelvicalyceal system not dilated. Tiny concretion noted in upper pole of left kidney measuring ~ 3.0 mm. No evidence of any mass lesion. Left ureter is not dilated in visualized part with obscured part of it.

UB Normal in size, shape & distention. No evidence of any calculus or mass lesion.

Contd..

Dr. Supriya Katiyar

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Ex-Senior Resident, SGPGI, Lucknow
Histopathology, Cytology, Oncohematology
(Consultant pathologist)

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Left kidney Left kidney is normal in size (~ 8.4 x 3.5 cm), shape and echogenicity with relative medial / inferior location. CMD is normal. Pelvicalyceal system not dilated. **Tiny concretion noted in upper pole of left kidney measuring ~ 3.0 mm.** No evidence of any mass lesion. Left ureter is not dilated in visualized part with obscured part of it.

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Report contd.

Uterus *Post LSCS configuration, normal in size (~ 8.5cm x 4.3cm x 4.9cm) and echogenicity. Relative coarsening of myometrial echotexture. Evidence of heterogeneous hypoechoic lesion noted in fundo-posterior myometrial wall measuring ~ 1.9 x 2.0 cm. Endometrium is midline in position and normal in thickness (~ 9.2 mm). Cervix is normal in size, shape, contour except minimally hypertrophied cervical mucosa with tiny nabothian cyst.*

Right Ovary *Normal in size, shape and echogenicity. No adenexal mass lesion.*

Left Ovary *Normal in size, shape and echogenicity. No adenexal mass lesion.*

- No sizeable pleural effusion in CP angle region on either side.
- No ascites.
- Excessive gas filled bowel loops noted in bilateral flank.

IMPRESSION: *USG findings are suggestive of –*

- ✓ *Tiny left renal concretion as described above.*
- ✓ *Heterogeneous hypoechoic lesion noted in fundo-posterior myometrial wall of uterus as described above – Fibroid.*
- ✓ *Minimally hypertrophied cervical mucosa with tiny nabothian cyst.*
- ✓ *Excessive gas filled bowel loops noted in bilateral flank.*

Please correlate clinically

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- ❖ *Ultrasound is not the modality of choice to rule out subtle bowel lesions.*
- ❖ *Appendix can't be seen on USG in all cases.*
- ❖ *Bowel pathology can not be ruled out in many of cases in USG.*
- ❖ *CBD calculi can not be ruled out in many cases due to bowel gases.*
- ❖ *USG has sensitivity of 74% to 90% in cases of renal stone i.e. USG can not detect all cases of renal stones.*
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Uterus Post LSCS configuration, normal in size (~ 8.5cm x 4.3cm x 4.9cm) and echogenicity. Relative coarsening of myometrial echotexture. Evidence of heterogeneous hypoechoic lesion noted in fundo-posterior myometrial wall measuring ~ 1.9 x 2.0 cm. Endometrium is midline in position and normal in thickness (~ 9.2 mm). Cervix is normal in size, shape, contour except minimally hypertrophied cervical mucosa with tiny nabothian cyst.

Right Ovary Normal in size, shape and echogenicity. No adenexal mass lesion.

Left Ovary Normal in size, shape and echogenicity. No adenexal mass lesion.

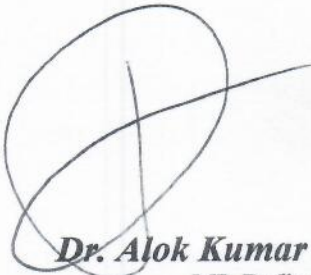
- No sizeable pleural effusion in CP angle region on either side.
- No ascites.
- Excessive gas filled bowel loops noted in bilateral flank.

IMPRESSION: USG findings are suggestive of –

- ✓ Tiny left renal concretion as described above.
- ✓ Heterogeneous hypoechoic lesion noted in fundo-posterior myometrial wall of uterus as described above – Fibroid.
- ✓ Minimally hypertrophied cervical mucosa with tiny nabothian cyst.
- ✓ Excessive gas filled bowel loops noted in bilateral flank.

Please correlate clinically

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Kindly Note

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- ❖ USG can not rule out all abdominal pathologies and needs further evaluation in many suspected cases.
- ❖ Ultrasound is not the modality of choice to rule out subtle bowel lesions.
- ❖ Appendix can't be seen on USG in all cases.
- ❖ Bowel pathology can not be rule out in many of cases in USG.
- ❖ CBD calculi can not be ruled out in many cases due to bowel gases.
- ❖ USG has sensitivity of 74% to 90% in cases of renal stone i.e. USG can not detect all cases of renal stones.
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Rahul Das



Dyslipidemia / HDL low

Date: 9/10/21

[Fatty Liver

Shr - Fibrosis

- heart pumping
 - colon pumping } 12 weeks
 (by)

D: Fatty Liver (100/28)

[HDL - A
 H. Dglu
 HDL New Band
 heart muscle (muscle)

Shr Weight Reduction

T & V T E B P <
 B. by p - a b my o d
 Cough Adms
 15 days

3) T-Bawka B = Dod 1513

↳ T. Protholun 25ug 45

↳ T. Benicup B D
(200mg full rd)

↳ T. Febyant hoy id

↳ Isam B Powder
2 tsp = 200ml water
NS

15ly

↳ T. Bawky plus NS & 3ly
3ly

Next time
6:30 p m

→ No Waiting



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MD Pathology, (K.G.M.U.), Lucknow

Patient Name : Mr. Rahul Anand	Date : 9-Oct-21
Referred By : Dr. Gautam	Age / Sex : 38 Yrs./ M
Investigation : Ultrasound Whole Abdomen	

OBSERVATION

Liver *Mild hepatomegaly (~ 15.7 cm) with grade I / II diffuse fatty infiltration. No evidence of any focal lesion. Intra Hepatic Biliary Radicals not dilated. Hepatic veins are normal in course and caliber.*

Portal vein is normal in course and caliber.

GB *Normal in distension and wall thickness. No evidence of any sizeable calculus or mass lesion.*

CBD is normal in course, caliber and clear throughout it's course.

Pancreas *Normal in size, shape and echogenicity. No evidence of any sizeable mass lesion. Main Pancreatic duct not dilated.*

Spleen *Normal in size (~ 10.0 cm), shape & echogenicity. No evidence of any focal lesion. Splenic vein at hilum is normal.*

Retroperitoneum

No evidence of sizeable retroperitoneal lymphadenopathy. Visualized segment of aorta and IVC normal.

Right kidney *Right kidney is normal in size (~ 10.2 x 4.3 cm), shape, position and echogenicity. CMD is normal. Pelvicalyceal system not dilated. No evidence of any calculus or mass lesion. Right ureter is not dilated in visualized part with obscured part of it.*

Left kidney *Left kidney is normal in size (~ 10.1 x 4.1 cm), shape, position and echogenicity. CMD is normal. Pelvicalyceal system not dilated. No evidence of any calculus or mass lesion. Left ureter is not dilated in visualized part with obscured part of it.*

Contd..

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Right kidney *Right kidney is normal in size (~ 10.2 x 4.3 cm), shape, position and echogenicity. CMD is normal. Pelvicalyceal system not dilated. No evidence of any calculus or mass lesion. Right ureter is not dilated in visualized part with obscured part of it.*

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Report Contd..

UB *Low level internal echoes in urinary bladder lumen.
No evidence of any calculus or mass lesion.*

Prostate *Normal in size (Measuring ~ 3.0 x 3.6 x 3.2 cm, weight about ~ 18.9 Gms) with normal shape & echotexture. No median lobe enlargement.*

- ✓ No sizeable pleural effusion in CP angle region on either side.
- No ascites.
- Excessive gas filled bowel loops noted in bilateral flank.
- Subtle edematous appearance of distal ileum and adjacent caecum.
- Few subcentimeter non-specific mesenteric lymphnodes noted measuring upto ~ 12.3 x 5.1 mm—
Likely Reactive.

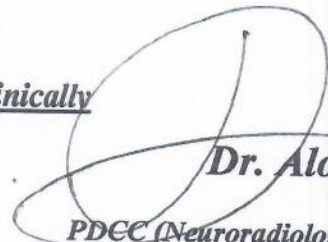
IMPRESSION: *USG findings are suggestive of—*

- ✓ Mild hepatomegaly with grade I / II diffuse fatty infiltration.
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