

डा0 नरेन्द्र केन MBBS.DMRD.IFUMB.MIRIA

अल्ट्रासोनोलोजिस्ट एवं रेडियोलोजिस्ट

Pt's Name SITARANI Under Care of Age / SePated: J.F..... 16 August 2018

U/S KUB / LOWER ABDOMEN

BOTH KIDNEYS - normal in size and shape. NO hydronephrosis present in both kidneys .CM differentiation maintained on both side.Perirenal spaces is clear. Parenchymal thickness maintained on both side. Surface of both kidneys regular.

BOTH URETERS not dilated.

URINARY BLADDER - distended.

UTERUS - normal in size and shape.

No free fluid seen in peritoneal cavity.

OPINION.

bowel wall thick irregular and edematous Right sided 75 mm ovarian cystic lesion present No septa / no mural nodule / no ascitis seen

Please correlate clinically.

DR NARENDER KAIN MBBS DMRD MIRIA IFUMB **RADIOLOGIST**

(LLL)

(प्रत्येक रविवार साँय की OPD बन्द रहेगी) CT-SCAN की सुविधा 24 घन्टे उपलब्ध है।

कवि नगर, गढ़ चुंगी, गढ़ रोड, हापुड़, Ph : No. 0122-2334455, 9837085256

0.00 बजे से 2.00 बजे तक .00 बजे से २ ०० बजे नक

मेडिकोलीगल उपयोग

रंगीन अल्ट्रासाऊण्ड की विशेष सविधा उपलब्ध है।

Scanned with CamSca



ति एवं स्त्री रोग विशेषज्ञ एवं सर्जन

डा० नरेन्द्र केन MBBS, OMRD, IFUMB, MIRIA

अल्हासोनोलोजिस्ट एवं रेडियोलोजिस्ट

SITARANI Age / Sex 65 Y / F Pt's Name SELF 24 August 2017 Under Care of

U/S KUB / LOWER ABDOMEN

BOTH KIDNEYS - normal in size and shape. NO hydronephrosis present in both kidneys .CM differentiation maintained on both side.Perirenal spaces is clear. Parenchymal thickness maintained on both side. Surface of both kidneys regular.

not dilated, BOTH URETERS -

URINARY BLADDER - distended,

UTERUS - normal in size and shape.

No free fluid seen in peritoneal cavity. OPINION.

80 mm cystic lesion in right ovary Please correlate clinically.

DR NAREŇ MBBS DMRD MIRIA IFUMB **RADIOLOGIST**

(प्रत्येक रविवार साँय की OPD बन्द रहेगी) CT-SCAN की सुविधा 24 घन्टे उपलब्ध है।

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सुबह 10.00 बजे से 2.00 बजे तक ०० बच्चे से ० ०० बच्चे तक मेडिकोलीगल उपयोग के जिए नहीं

रंगीन अल्ट्रासाऊण्ड की

Scanned with CamSca

Drug Wall Scarl Centre (PNDT No. HPU/2012/007)

'Shivam Parisar' Opp. HDFC Bank, Railway Road, HAPUR-245101, Ph.. :0122- 2317599, Cell. : 9837180409

Alok Maheshwari

M.B.B.S., M.D. (Radiodiagnosis) Lucknow Ex Senior Resident Sanjay Gandhi PGI, Lucknow MCI Regd. No. 33965

MRS SITARANI

66 YRS F

* ULTRASOUND

* DIGITAL X-RAYS

★ FOLLICULAR STUDIES

* DIGITAL OPG

DEC 31,2016

REFERED BY : DR MANISHA BHMS

PELVIC ULTRASOUND STUDY :

Uterus is small in size and anteverted. No significant focal seen. Parenchymal texture lesion is is Endometrial cavity is empty & shows weak response.

Uterine cervix is normal.

No fluid in vagina is recognised.

Both the adnexa are normal.Right sided moderate ovarian Cyst is seen measuring 69x60 mm . The cyst is thin walled and uniloculated . No Areas of calcification and solid components are seen.

Cul de sac is free.

OPINION:

1. POST MENOPAUSAL SMALL SIZE UTERUS WITH EMPTY CAVITY SHOWING WEAK RESPONSE. 2. MODERATE SIZE RIGHT SIDED UNILOCULATED SIMPLE OVARIAN CYSTS----USG MORPHOLOGY SUGGESTS FUNCTIONAL CYST.

PLEASE CORRELATE.

DR AALOK MAHESHWARI MD

Anubhav Kirtikar M.B.B.S., PGCC Dr. Alok Mahes

Kindly Note . .

सोमती नर्सिंग होम

पोमती केन GO (KGMC) IFUMB त्री रोग विशेषज्ञ एवं सर्जन डा0 नरेन्द्र केन

M.B.B.S., D.M.R.D., I.F.U.M.B., M.I.R.I.A. अल्ट्रासोनोलोजिस्ट एवं रेडियोलोजिस्ट

Dated.....

Pt's Name	SITARANI	Age / Sex 66 Y / F
Under Care of	DR BKTYAGI MD	24 November 2016

U/S KUB / LOWER ABDOMEN

BOTH KIDNEYS - normal in size and shape . NO hydronephrosis present in both kidneys .CM differentiation maintained on both side.Perirenal spaces is clear. Parenchymal thickness maintained on both side. Surface of both kidneys regular.

BOTH URETERS - not dilated,

URINARY BLADDER - distended.

UTERUS - normal in size and shape.

No free fluid seen in peritoneal cavity.

OPINION.

RIGHT SIDED 65 X 67 MM OVARIAN CYST PRESENT

Please correlate clinically.

DR NARENDER KAIN

MBBS DMRD MIRIA IFUMB

RADIOLOGIST

CT-SCAN की सुविधा 24 घन्टे उपलब्ध है।

कवि नगर, गढ़ चुंगी, गढ़ रोड, हापुड़, Ph : No. 0122-2334455, 9837085256



सोमती नरिंग होम

डा० सोमती केन

мввs, DGO (KGMC) IFUMB प्रसूति एवं स्त्री रोग विशेषज्ञ एवं सर्जन

डा० नरेन्द्र केन

M.B.B.S., D.M.R.D., I.F.U.M.B., M.I.R.LA. अल्ट्रासोनोलोजिस्ट एवं रेडियोलोजिस्ट

Pt's Name	SITA RANI	Age/ Sex Dated F
Under Care of	SELF	17 August 2016

CECT WHOLE ABDOMEN

Serial axial sections were obtained from the domes of diaphragm till the pubic symphysis after IV injection of non-ionic contrast. Oral contrast was also administered for bowel opacification.

The liver is normal in size, contour and attenuation. No obvious focal hepatic Parenchymal lesion is seen. The Intrahepatic biliary radicles are not dilated.

Portal vein and CBD are normal in calibre.

Pancreas is normal in size, shape and outline with normal attenuation. No focal lesion is seen.

Spleen and adrenals appear normal in attenuation. No focal lesion is seen.

Bilateral kidneys are normal in position, size and attenuation. No evidence of hydronephrosis / ureteric dilatation is seen on either side.

The bowel loops are unremarkable.

Urinary bladder is normal in distensibility and wall thickness.

uterus is of normal in size and in attenuation. No focal lesion seen

No evidence of free fluid / any loculated fluid collection is seen in abdomen.

No evidence of abdominal lymphadenopathy is seen.

OPINION- RIGHT SIDED 63 X 70 MM SIMPLE CYSTIC OVARIAN CYST

ADV CA 125

PLEASE CORRELATE CLINICALLY

DR NARENDER KAIN MBBS DMRD MIRIA IFUMB RADIOLOGIST

CT-SCAN की सुविधा 24 घन्टे उपलब्ध है।

कवि नगर, गढ़ चुंगी, गढ़ रोड, हापुड़, Ph : No. 0122-2334455, 9837085256

10 00 बजे से 2.00 बजे तक

मेडिकोलीगल उपयोग

रंगीन अल्ट्रासाऊण्ड की विशेष सुविधा उपलब्ध है।

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सोमती नर्सिंग

सोमती केन DGO (KGMC) IFUMB

वं स्त्री रोग विशेषज्ञ एवं सर्जन

M.B.B.S., D.M.R.D., I.F.U.M.B., M.I.R.I.A

अल्ट्रासोनोलोजिस्ट एवं रेडियोलोजिस्ट

Dated.....



	I C' DANI	Age/Sex 65 Y /F
Pt's Name	Sita RANI	10 July 2016
Under Care of	DR SOMTI KAIN MBBS DGO	10)

USG WHOLE ABDOMEN

LIVER - mildly enlarged in size. Shape is maintained. Echogenecity of liver maintained.

No echovariant lesion seen in liver parenchyma .NO IHBRD seen.

Caudate lobe normal. Diameter of hepatic vein maintained.

CBD AND PV - normal in course and caliber.

PANCREAS - normal in size and shape. Pancreatic duct not dilated.

SPLEEN - normal in size and shape. Echogenecity of spleen maintained.

No echo variant lesion seen in splenic parenchyma.

BOTH KIDNEYS - normal in size and shape. No hydronephrosis present in both kidneys

CM differentiation maintained on both side. Perirenal spaces is clear. Parenchymal

thickness maintained on both side. Surface of both kidneys regular.

not dilated. BOTH URETERS -

URINARY BLADDER - distended

UTERUS - normal in size and shape .

No free fluid seen in B/L pleural and peritoneal cavity.

OPINION.

RIGHT SIDED 65 MM CYSTIC LESION IN RIGHT OVARY

PLEASE CORELATE CLINICALLY.

DR NARENDER K

MBBS DMRD MIRIA IFUMB

RADIOLOGIST

DEV NANDINI HOSPITAL

NEAR GARH CHUNGI RAILWAY CROSSING, GARH ROAD, HAPUR - 245 101 (U.P.) T 9219429200, 7500246422, 0122-3200700, 2333717 e-mail: devnandinihospital2007@rediff.com

Pt's Name	MRS. SITA RANI	Age/Sex 66 Y/F	
The second secon	DR VIMLESH SHARMA MS	16 June 2016	

Thank You for Referral

ULTRASOUND LOWER ABDOMEN

Urinary Bladder shows normal wall thickness with echofree lumen. No evidence of any calculi or mass seen.

Uterus is post menopausal.

Endometrial thickness is 3.5 mm.

Right ovaries is a adnexa cyst is size measuring approx 72 x 62 mm.

Left ovaries is normal.

Bilateral adnexal regions are clear.

Pouch of Douglous is clear.

IMPRESSION: RIGHT OVARIES CYST.

Note: (1) This report is NOT valid for medico-legal purposes.

(2) In case of any discrepancy due to machine error or typing error, please get it rectified immediately

> DR. SUMAN SINGH **SONOLOGIST**

VIMLESH SHARMA MS, FICS, ICMCH, IFUMB

DR. ANUBHAV KIRTIKAR MBBS, PGDS

DR. VIBHA NIME **MBBS** RADIO DIAGN











IOULD ALWAYS BE CONSIDERED IN CO-RELATION WITH THE CLINICAL AND OTHER INVESTIGATION EINDINGS MA



	Age/Sex 66 Y/F
The state of	MRS SEETA RANI Date 15/6/16
Under Care of	DR P SHARMA MD

USG WHOLE ABDOMEN

LIVER normal in size. Shape is maintained, echogenicity normal.

Caudate lobe normal

GALL BLADDER 11/0 CHOLICYSTECTOMY

CBD AND PV normal in course and caliber.

PANCREAS normal in shape & echotexture

SPLEEN - normal in size. No echo variant lesion seen in splenic parenchyma. BOTH KIDNEYS are normal in size and shape. No hydronephrosis present in both kidneys. CM differentiation maintained on both side. Perirenal spaces are clear. Parenchymal thickness maintained on both side. Surface of both kidneys regular.

BOTH URETERS not dilated,

partially distended appears normal URINARY BLADDER

UTERUS - normal in size , shape & echotexture as per age . a anechoic cystic

lesion of 65 mm seen in right adenexal region

No free fluid present in B/L pleural and percardial cavity. No fluid seen in dependent pelvic peritoneal cavity

OPINION.— Present usg reveals

RIGHT ADENEXAL CYST

80W-- TVS

PLEASE CORELATE CLINICALLY.

KIRTIKAR DR ANUBI MBBS PGDS

Dr. Anubhav Kirtikar

M.B.B.S., PGDS, PGCC Ultrasonologist Dr. Parag Dip. Cardi

◆ DIGITAL X-RAY'S ◆ ROUTINE ULTRASONOGRAPHY ◆ COLOUR DOPPLER ◆ ECHOCARDIO

THE FINDINGS SHOULD BE CONSIDERED IN CO-RELATION WITH THE CLINICAL AND OTHER INVESTIGATION FINDINGS WHERE APPLICABLE THIS REPORT IS NOT MEANT FOR MEDICO



LOKPRIYA HOSPI

LOKPRIYA RADIOLOGY CENTRE

SAMRAT PALACE, GARH ROAD, MEERUT - 250003



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DATE	01.04.2021				-	_
DATIENT		REF. NO.	9305			1
INVESTIGATION	THE TOTAL OF THE T	AGE	71 YRS	SEX:	F	1
W 25 TIGATION	USG WHOLE ABDOMEN	REF. BY				1

REPORT

<u>Liver</u> – appears normal in size and echotexture. No mass lesion seen. Portal vein is normal.

<u>Gall bladder</u> – Wall thickness is normal. No calculus / mass lesion seen. CBD is normal.

<u>Pancreas</u>- appears normal in size and echotexture. No mass lesion seen.

Spleen- is normal in size and echotexture.

Right Kidney - Normal in size and echotexture. Show well maintained corticomedullary differentiation. No calculus / hydronephrosis is noted.

Left Kidney - Normal in size and echotexture. Show well maintained corticomedullary differentiation. No calculus / hydronephrosis is noted.

<u>Urinary bladder</u> – appears distended. Wall thickness is normal. No calculus / mass seen

Uterus - Post menopausal status.

There is evidence of a well defined, anechoic cystic lesion in right adnexa measuring (71 x 68) mm.

Left adnexa is unremarkable.

IMPRESSION

Right adnexal cystic lesion.

ADV - CEMRI PELVIS IF CLINICALLY NEEDED.

M.B.B.S. D.M.R.D. (VIMS & RC) Consultant Radiologist and Head

Impression is a professional opinion & not a diagnosis
All modern machines & procedures have their limitations. if there is variance clinically this examination may be repeated or reevaluated by other investigations
Ps. All congenital anomalies are not picked upon ultrasounds.
Suspected typing errors should be informed back for correction immediately.
Not for medico-legal purpose. Identity of the patient cannot be verified.

1.5 Tesla MRI • 64 Slice CT • Ultrasound Doppler • Dexa Scan / BMD • Digital X-ray

PRENATAL DETERMINATION OF SEX IS BANNED PREVENT FEMALE FOETICIDE

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