

Patient Name : Baby.Jhanvi
Age / Sex : 11 Y / F
Referred By : Dr. KANAV ANAND
Centre : HARGOVIND ENCLAVE

Lab No : KKD2403389642
Registration On : 11-Mar-24 11:04
Patient ID : UKKD.0000165337

Test Name: NCCT WHOLE ABDOMEN

Approved On: 11-Mar-24 14:43

NCCT WHOLE ABDOMEN

STUDY PROTOCOL:

AXIAL HI RESOLUTION SERIES OBTAINED ON STATE OF ART MULTI DETECTOR CT SCANNER TO INCLUDE THE ENTIRE ABDOMEN FROM DIAPHRAGMATIC DOMES TO THE PUBIC SYMPHYSIS.

Clinical Details:- Follow-up case of SRNS (FSGS). Post tacrolimus in remission with IDA with constipation. C/o constipation.

FINDINGS: -

Liver appears normal in size and attenuation. **Few foci of calcification are seen peripherally in segment VIII.** Intrahepatic biliary radicals are normal. Portal vein is normal.

Gall bladder is distended. No evidence of hyperdense calculus is seen (*Ultrasound is the modality of choice for gall bladder calculus*). No obvious pericholecystic collection. CBD is normal in course and calibre.

Spleen is normal in size and attenuation.

Pancreas appears slightly bulky and shows normal attenuation. No parenchymal calcification is seen. No obvious surrounding inflammatory changes are seen.

Bilateral suprarenal glands appear unremarkable.

Right kidney measures ~ 6.5 cm in length. No evidence of calculus or hydronephrotic changes seen. Perinephric fat and fasciae appear clear.

Left kidney measures ~ 7.2 cm in length. No evidence of calculus or hydronephrotic changes seen. Perinephric fat and fasciae appear clear.

Urinary bladder appears normal in distention and contour. No obvious focal wall thickening / intraluminal pathology seen.

Scan to Validate



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Uterus is visualized. No obvious adnexal mass is seen on either side.

Visualized bowel loops appear normal.

No free fluid is seen.

No size significant retroperitoneal / mesenteric lymphadenopathy seen.

IMPRESSION:

- **Few foci of calcification in liver.**
- **Slightly bulky pancreas without obvious surrounding inflammatory changes. Suggested serum amylase / lipase correlation (if clinically indicated).**
- **Small bilateral kidneys. Suggested KFT correlation.**

ADVICE: CLINICAL CORRELATION.

Investigations have their limitations. Solitary investigations never confirm the final diagnosis of disease. It only helps in diagnosing the disease in correlation to the clinical symptoms. Not meant for medico legal purposes



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In case of any discrepancy due to typing error, kindly get it rectified immediately. This is professional opinion, not a diagnosis.

Scan to Validate



Conditions Of Reporting

- ▶ The report results are for information and interpretation for your referring doctor. Reports are to be correlated with the patient's clinical history.
- ▶ Biological Reference Range/Interval is suggested for your Gender and Age on the basis of available literature. All reference ranges are to be reconsidered by physician's advice for your specific care.
- ▶ This Medical Report is a professional opinion, not a diagnosis.
- ▶ The report will carry the name and age provided at the time of registration. To maintain confidentiality, certain reports may not be e-mailed at the discretion of the management.
- ▶ All the notes and interpretation beneath the pathology result in the report provided are for educational purpose only. It is not intended to be a substitute for physician's consultation.
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DOC#COR20200707

Facilities Available

Radiology

- ▶ 3T MRI & 1.5T MRI
- ▶ CT Scan
- ▶ Digital X-Ray
- ▶ Mammography
- ▶ Open / Standing MRI
- ▶ Bone DEXA Scan

Pathology

- ▶ Biochemistry
- ▶ Immunoassay
- ▶ Hematology
- ▶ Clinical Pathology
- ▶ Serology
- ▶ Microbiology

Nuclear Medicine

- ▶ **India's First** Simultaneous PET-MRI
- ▶ Whole Body PET/CT Scan
- ▶ DTPA / DMSA Renal Scans
- ▶ Thyroid Scan
- ▶ Whole Body Bone Scan
- ▶ HIDA Scan • Rest MUGA

Cardiology Investigations

- ▶ ECG (Electrocardiogram)
- ▶ Echocardiography
- ▶ TMT
- ▶ Stress Echocardiography
- ▶ Stress Thallium

Neurology Investigations

- ▶ EEG - ElectroEncephaloGram
- ▶ EMG - ElectroMyoGraphy
- ▶ NCV - Nerve Conduction Velocity
- ▶ VEP - Visual Evoked Response
- ▶ SSEP

Dental Imaging

- ▶ CBCT - Cone Beam CT Scan
- ▶ OPG - OrthoPantomoGram

Other Tests

- ▶ PFT