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Lab No :KKD240Registration On :13-Apr-2Patient ID :UKKD.00

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#### MRI MRCP MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY

#### **STUDY PROTOCOLS:**

SERIES OF 3D CROSS SECTIONAL BREATH HOLD FAST SPIN-ECHO M. R. C. P. SEQUENCE HAS BEEN PERFORMED IN CORONAL, OBLIQUE PLANE USING DEDICATED QUADRATURE DETECT BODY COIL on TWIN GRADIENT 1.5 TESLA SYSTEM. BREATH HOLD FAST SPIN ECHO T2W FAT SAT AXIAL IMAGES OF UPPER ABDOMEN WERE OBTAINED AND CORRELATED WITH BREATH HOLD T2W CORONAL IMAGES.

## **Clinical History: FUC SRNS. Abdomen pain**

## Findings:

**Liver** is normal in size (~ 120 mm), outline and signal intensity. No focal hepatic lesion seen. Bilobar central and peripheral IHBR are normal.

**Gall bladder** is distended. No evidence of calculus seen seen in the lumen. Wall thickness is normal. No evidence of any pericholecystic fluid or edema.

Biliary system	Diameter
Right hepatic duct	2.8 mm
Left hepatic duct	2.0 mm
Common hepatic duct	5.3 mm
Common bile duct (prox.)	5.0 mm
Common bile duct (dist.)	1.5 mm
Pancreatic duct	1.8 mm

Pancreatico-biliary junction : The CBD and pancreatic duct are showing separate openings in duodenum.

**Pancreas:** The main pancreatic duct is normal in caliber and showing separate opening in the 2nd segment of the duodenum. Pancreas is normal in morphology and signal intensity.

Spleen appears normal in size (~ 100 mm) and signal intensity.

Bilateral kidneys are normal in size & signal intensity. No focal lesion is seen.

Visualized small & large bowel loops and stomach are seen in partially distended state.

# IMPRESSION: MRCP findings reveal:

Pancreas divisum without demonstrable inflammatory changes in the pancreas

# Normal caliber CBD without calculus or distal obstruction

Suggested clinical correlation

Dupak Ga

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