

MD COMPUTED TOMOGRAPHY REPORT

Patient Name : Mr. SUDARSANAM VIJAYA SARADHI	Age / Gender : 83 Y(s) / Male
Requested Date : 26-Sep-2025 12:41 PM	Admn / UMR No : IP25-004084 / UMR323088
Reported Date : 26-Sep-2025 05:33 PM	Result/Service No : RES250251088/S1980902
Referred By : Walk-In	Ward/Room/Bed : NICU/306/6
Advised By : Dr. S MADHAVI MD	Lab No : TRN

CECT EXAMINATION OF ABDOMEN

TECHNIQUE

Volumetric acquisition of entire abdomen from the level of domes of diaphragm to greater trochanter performed on MDCT. No contrast reaction. Source axial images are reconstructed in sagittal and coronal planes. Filming performed.

FINDINGS

Lower Thoracic Sections: Lungs show minimal right pleural thickening with small area of plate atelectasis in the right lung lower lobe. Minimal left pleural effusion.

Hepatobiliary System:

- Intrahepatic biliary radicle dilatation noted.
- The common bile duct is dilated along its entire length. In the distal portion of the common bile duct, there appears to be a radiolucent calculus of approximate 12.0 x 9.0 mm. This finding needs further confirmation with MRCP.
- The left lobe of the liver appears normal. Caudate lobe is slight hypertrophied.
- In the right lobe of the liver along superior margin involving segment VII, there is a focal lesion of approximate dimension 5.2 x 4.8 cm; another focal lesion also noted in the right lobe segment VII of size 1.6 x 2.5 cm; and also another lesion noted in the segment VI of size 2.1 x 1.8 cm. All these lesions are hyperenhancing on arterial phase, with washout of contrast on venous phase. The finding is suggestive of hepatocellular carcinoma. Please correlate with the serum AFP levels.

Pancreas: Normal morphology and enhancement. Peripancreatic fat planes unremarkable. No pancreatic duct dilation. No pancreatic calcification. No collections in the lesser sac region.

Splenoportal axis unremarkable.

Spleen: Normal morphology and enhancement. No focal lesions. Spleenic vessels unremarkable.

Adrenal Glands: Right and left adrenal glands show normal morphology, and enhancement.

Kidneys and Ureters: Bilateral kidneys are of normal morphology and enhancement. No calculi evident. No hydronephrosis. Perinephric fat planes appear normal. Ureters are not dilated. Renal vein show no thrombosis.



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Retroperitoneum: Aorta is of normal course and caliber. No evidence of any aneurysm or dissection. Major branches of abdominal aorta are unremarkable. Inferior vena cava is normal in course and caliber. No retroperitoneal lymph nodal enlargement.

Peritoneal Cavity and Bowel Loops: Minimal free fluid in pelvic and peritoneal cavity. No free air in the peritoneal cavity. Mesenteric root unremarkable. Bowel loops well distended and unremarkable. No intestinal obstruction. No mesenteric lymph nodal enlargement.

Pelvic Viscera: Urinary bladder is empty, with Foley's catheter in situ. Prostate is not enlarged. Periprostatic fat planes are unremarkable. No pelvic lymph nodal enlargement. Bilateral ischiorectal fossa unremarkable.

Osseous Structures: No lytic lesions evident. Decrease in the height of L5-S1, L3-4, and L2-3 intervertebral discs. Bilateral psoas muscles and paravertebral musculature unremarkable.

IMPRESSION

1. Multiple hypervascular lesions in the right lobe of the liver with arterial enhancement and venous washout, suggestive of hepatocellular carcinoma. Correlate with serum AFP levels.
2. Dilated intrahepatic and common bile ducts with a distal common bile duct radiolucent calculus (~12.0 x 9.0 mm). Recommended further evaluation with MRCP.
3. Minimal free fluid in the pelvic and peritoneal cavity.
4. Minimal right pleural thickening with small plate atelectasis and minimal left pleural effusion.
5. Slight hypertrophy of the caudate lobe of the liver.

*** End Of Report ***

leg
Dr. DANDAMUDI SRINIVAS, MD
CONSULTANT RADIOLOGIST
Dr

Test Name	Result	Bio. Ref. Range	Unit	Method
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Prothombin Time (PT/INR) , SODIUM CITRATE PLASMA

Prothombin Time (PT/INR)	20.80	13.4-15.3	Sec	Optical Nephelometric
Mean Normal Prothrombin Time (MNPT)	14.30			
INR	1.52	0.9-1.1		Calculated

If Values are marked with * , they are critical values.

*** End Of Report ***

K. K.
Dr K Kalyan
MD (Pathology)
Consultant Pathologist
Reg.No:43148





Laboratory Reports

Patient Information	Specimen Information	Client/Doctor Information
Name : Mr.SUDARSANAM VIJAYA SARADHI	Visit ID : LAVV197232	Client Code : HLM0021
Age/Gender : 83 Y 4 M 26 D/Male	Collected : 26/Sep/2025 05:27	Client Name : ICU
MobileNo : 9603959595	Received : 26/Sep/2025 05:29	Client Add. :
UHID : UMR323088	Reported : 26/Sep/2025 07:51	Client No. :
Address : AAYUSH HOSPITALS VIJAYAWADA	IP/OP/Barcode : IP25-004084	Ref Doctor : Dr.S Madhavi
	Report Status : Final Report	

Test Name	Result	Bio. Ref. Range	Unit	Method
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Hemogram (CBC with ESR) , WHOLE BLOOD EDTA

Hemoglobin (Hb)	11.40	13-17	g/dL	Spectrophotometry
Packed Cell Volume (PCV) / Hematocrit	34.4	40-50	%	Calculated
Red Blood Cell (RBC) Count	3.83	4.5-5.5	Million/cu.mm	Impedance
Mean Corpuscular Volume (MCV)	89.8	83-101	fL	Calculated
Mean Corpuscular Hemoglobin (MCH)	29.8	27-32	pg	Calculated
Mean Corpuscular Hb Concentration (MCHC)	33.2	31.5-34.5	g/dL	Calculated
Red Cell Distribution Width (RDW-CV)	21.3	11.6-14	%	Calculated
Total Leucocyte Count (TLC)	15,160.0	4000-10000	Cells/cu.mm	Impedance
Differential Leucocyte Count (DLC)				
Neutrophils	88.0	40-80	%	Impedance & FCM
Lymphocytes	7.0	20-40	%	Impedance & FCM
Monocytes	4.0	2-10	%	Impedance & FCM
Eosinophils	1.0	1-6	%	Impedance & FCM
Basophils	0.0	0-2	%	Impedance & FCM
Absolute Leucocyte Count				
Neutrophils	13,341	2000-7000	Cells/cu.mm	Calculated
Lymphocytes	1,061	1000-3000	Cells/cu.mm	Calculated
Monocytes	606	200-1000	Cells/cu.mm	Calculated
Eosinophils	152	20-500	Cells/cu.mm	Calculated
Platelet Count	137,000	150000-410000	per cu.mm	Impedance
Mean Platelet Volume (MPV)	9.1	7.4-12.0	fL	Impedance
Erythrocyte Sedimentation Rate (ESR)	23	0-15	mm	Modified Westergrens

Interpretation:

Erythrocyte Sedimentation Rate (ESR) is a non-specific phenomena and is clinically useful in the diagnosis and monitoring of Pyogenic infection, inflammation and malignancies etc. It is especially low (0 - 1 mm) in polycythemia, hypofibrinogenemia, congestive cardiac failure poikilocytosis, spherocytosis or sickle cells.

Dr K Kalyan
MD (Pathology)
Consultant Pathologist
Reg.No:43148





Laboratory Reports

Patient Information	Specimen Information	Client/Doctor Information
Name : Mr.SUDARSANAM VIJAYA SARADHI	Visit ID : LAYV197232	Client Code : HLM0021
Age/Gender : 83 Y 4 M 26 D/Male	Collected : 26/Sep/2025 05:27	Client Name : ICU
MobileNo : 9603959595	Received : 26/Sep/2025 05:29	Client Add. :
UHID : UMR323088	Reported : 26/Sep/2025 06:58	Client No. :
Address : AAYUSH HOSPITALS VIJAYAWADA	IP/OP/Barcode : IP25-004084	Ref Doctor : Dr.S Madhavi
	Report Status : Final Report	

Test Name	Result	Bio. Ref. Range	Unit	Method
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Liver Function Test- LFT Profile , SERUM

Bilirubin, Total	11.60*	0.2-1.3	mg/dL	Azobilirubin
Bilirubin, Direct	10.50*	0.01-0.3	mg/dL	Calculated
Bilirubin, Indirect	1.10	0.0-1.1	mg/dL	Dual Wavelength
Alkaline Phosphatase (ALP)	345.0	38-126	U/L	4-nitrophenyl phosphate
Aspartate Aminotransferase (AST) SGOT	229.0	17-59	U/L	UV with P-5-P
Alanine Amino-transferase (ALT) SGPT	132.0	0-50	U/L	UV with P-5-P
Gamma Glutamyl Transferase (GGT)	507	15-73	U/L	Glycylglycine Nitroanalide
Total Protein	5.80	6.3-8.2	g/dL	Biuret
Albumin	2.80	3.5 - 5	g/dL	Bromocresol Green
Globulin	3.00	2-3.5	g/dL	Calculated
Albumin : Globulin Ratio (A:G Ratio)	0.93	1.1-2.5		Calculated

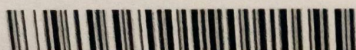
RFT- PCKG , SERUM

Blood Urea Nitrogen (BUN)	18.0	9.0 - 20.0	mg/dL	Urease
Urea	38.5	19.0-43.0	mg/dL	Urease
Creatinine	0.90	0.66-1.25	mg/dL	Creatinine amidohydrolase
Sodium	138.0	137-145	mmol/L	Direct ISE
Potassium	3.60	3.5-5.1	mmol/L	Direct ISE
Chloride	106.0	98 - 107	mmol/L	Direct ISE

If Values are marked with *, they are critical values.

*** End Of Report ***

Dr MB Sirisha
MD (Biochemistry)
Consultant Biochemist
Reg.No:60758



SIN No:BI04046846



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Laboratory Reports

Patient Information	Specimen Information	Client/Doctor Information
Name : Mr.SUDARSANAM VIJAYA SARADHI	Visit ID : LAYV197047	Client Code : HLM0021
Age/Gender : 83 Y 4 M 25 D/Male	Collected : 25/Sep/2025 12:15	Client Name : ICU
MobileNo : 9603959595	Received : 25/Sep/2025 12:16	Client Add. :
UHID : UMR323088	Reported : 25/Sep/2025 13:10	Client No. :
Address : AAYUSH HOSPITALS VIJAYAWADA	IP/OP/Barcode : IP25-004084	Ref Doctor : Dr.S Madhavi
	Report Status : Final Report	

Test Name	Result	Bio. Ref. Range	Unit	Method
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RFT- PCKG , SERUM

Blood Urea Nitrogen (BUN)	21.0	9.0 - 20.0	mg/dL	Urease
Urea	44.9	19.0-43.0	mg/dL	Urease
Creatinine	1.10	0.66-1.25	mg/dL	Creatinine amidohydrolase
Sodium	139.0	137-145	mmol/L	Direct ISE
Potassium	4.80	3.5-5.1	mmol/L	Direct ISE
Chloride	106.0	98 - 107	mmol/L	Direct ISE

*** End Of Report ***

Reports to follow-
Culture and Sensitivity, Urine- VITEK

Dr MB Sirisha
MD (Biochemistry)
Consultant Biochemist
Reg No:60758



SIN No:BI04043772