

Quest Medical Imaging RADIOLOGISTS



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Patient: Abuga, Margarette
Status: OUT PATIENT
Date of Birth: 02-Jun-1959
Acc: QC0000851
Date of Exam: 18-Jan-2018

CT OF THE ABDOMEN AND PELVIS PRE AND POST CONTRAST

HISTORY:

Microscopic hematuria. ? Insert nephropathy. Rule out structural renal pathology. ✓

Technique

Transaxial images have been performed from base of lungs to symphysis pubis. With oral and intravenous contrast media. The study has been reviewed in the transaxial and reformatted coronal and sagittal planes.

Findings

The liver, spleen and pancreas are normal in size and appearance. No focal or diffuse hepatic parenchymal abnormality is identified.

The gallbladder is normally distended and there is no evidence of cholelithiasis or cholecystitis. No intra or extrahepatic biliary duct dilatation is present.

No renal calculi. Both kidneys are normal in size and enhance normally after contrast administration. No pelvicalyceal system dilatation or renal mass lesion. The adrenal glands are normal.

No retrocrural, para-aortic, paracaval or mesenteric nor pelvic lymph node enlargement identified. Interrogating the bowel shows multiple sigmoid uncomplicated diverticuli.

Within the pelvis, the uterus is anteverted. The ovaries are atrophic. The Urinary bladder shows normal wall thickness. No bladder mass. No free fluid is noted in the abdomen or pelvis. ✓

Interrogating the bony skeleton shows extensive giant thoracic vertebral osteophytosis.

The images through the lower chest show no focal abnormality.

Conclusion

Normal; kidneys, ureters, bladder.

Normal upper abdominal organs

Read By: DR ANDREW KAMINTA ✓

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