HEKİMOĞLU Health Services

Imaging and Diagnostic Center 35th year

Name and Surname : **HAJIR GHAZI MARYOOSH AL-FKAIKI**

Date : **17.06.2022**

Examination : **WHOLE ABDOMEN ULTRASOUND EXAMINATION**

Sonographic Resolution : **GOOD**

Dear Colleague; All abdominal USG examination was performed using a GE Voluson 730 brand 3.75 mHz convex probe.

**Liver** size is within normal limits in mid-clavicular line and CC axis (132 mm), liver parenchyma echo is homogeneous and contours are natural. Parenchymal structure is natural. No solid or cystic space-occupying lesion was observed in the parenchyma. Portal and hepatic veins are normal.

**Gallbladder** dimensions and wall thickness are within normal limits. Lumen internal echo is natural. No dilatation was detected in the intra and extrahepatic bile ducts. The common bile duct is of normal width.

**Pancreatic** head width is normal, parenchyma echo is homogeneous.

**The spleen** size (97 mm in the long axis) is normal. No solid or cystic space-occupying lesion of the parenchyma was detected. Splenic vein diameter is normal.

**Right kidney** position, contour and dimensions (142 mm) are natural. Parenchyma echo is natural and its thickness (16 mm) is within normal limits. Cortex and medulla distinction can be made. No calculus was detected. **Grade 1 pelviectasis was observed in the right kidney collecting system.**

**Left kidney** position, contour and dimensions (125 mm) are natural. Parenchyma echo is natural and its thickness (17 mm) is within normal limits. Cortex and medulla distinction can be made. Pelvicalaxial dilatation or calculus was not detected.

**The bilateral adrenal** lodge appears natural.

**Bladder contours**, wall thickness and intralumen echo structure are normal. No pathology was detected in the trigon, at the distal ends of the ureter and at the entrance of the urethra.

**Uterus** has antevert-anteflex appearance. Myometrium echogenicity is homogeneous and no significant mass is observed. Endometrial double layer thickness was measured as 10 mm. Endometrial halo is smooth.

**Bilateral** ovarian sizes have increased, multiple cysts (polycystic ovary syndrome?) are present, and a 43 mm diameter anechoic cyst (theca lutein cyst?) is observed in the right ovary. Gynecological evaluation is recommended.

Abdominal aorta and both common iliac arteries were patent and no gross pathology was observed. No lymph node, intra-abdominal free or loculated fluid, space-occupying formation was detected in paraaortic pathological dimensions.

CONCLUSION:

* Right renal grade 1 pelviectasis
* Bilateral ovarian size has increased and multiple cysts (polycystic ovary syndrome?)
* Anechoic cyst of the right ovary (theca lutein cyst?). Gynecological evaluation is recommended.
* It is recommended to be evaluated together with clinical and laboratory findings.

Best regards,

Dr. Abdullah CEVAHIR Dr. Feyzi OZCINAR

Radiology Specialist Radiology Specialist

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