

BREAKTHROUGH IN RADIOLOGY DIAGNOSIS

CASE OF : CALCULUS CHOLECYSTITIS

PATIENT DETAILS

Name: RXXXX CXXXX

Age: 41 Yrs F

Investigation: MRCP

CLINICIAN DETAILS

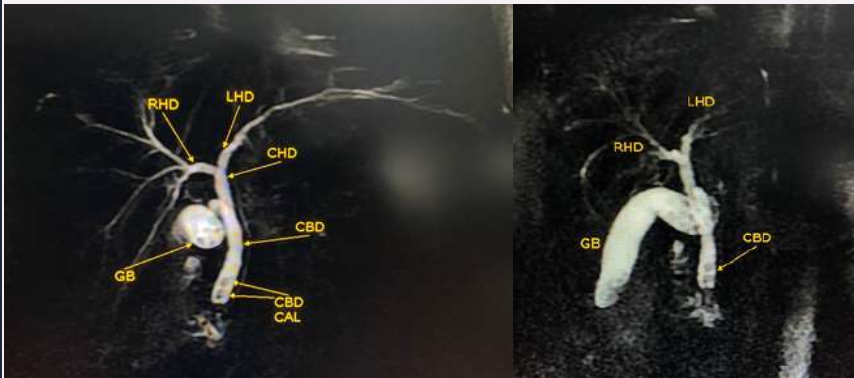
Name: Dr XXXXX XXXXX

RADIOLOGIST DETAILS

Name: DR SANJAY PATEL

MD , RADIOLOGIST

TECHNICIAN : RUSHIL PATEL



RADIOLOGICAL FINDINGS

1. GALL BLADDER IS WELL DISTENDED AND SHOWS MULTIPLE FILLING DEFECTS IN THE LUMEN OF VARIABLE SIZES. MILD DIFFUSE WALL THICKENING NOTED.

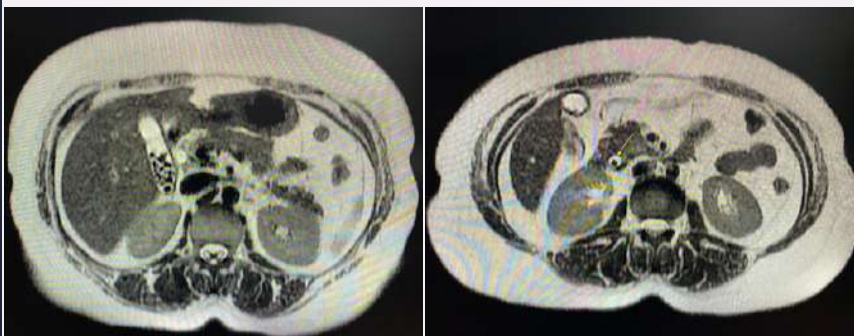
2. FEW FILING DEFECTS IN LOWER CBD WITH RESULTANT MILD DILATATION OF PROXIMAL CBD, CHD & RHD-LHD WITH PROMINENT CENTRAL IHBR.

LIVER APPEARS NORMAL IN SIZE AND SHOWS NORMAL PARENCHYMAL SIGNAL INTENSITY. NO EVIDENCE OF FOCAL MASS LESION.

PANCREAS APPEARS NORMAL.
NO EVIDENCE OF PANCREATIC CALCULUS OR CALCIFICATION.
NO EVIDENCE OF FOCAL MASS LESION IN PANCREATIC PARENCHYMA OR PERIPANCREATIC COLLECTION.
NO EVIDENCE OF STRICTURE IN PANCREATIC DUCT.
SPLEEN APPEARS NORMAL.
NO FOCAL MASS LESION IS SEEN IN SPLEEN.
BOTH KIDNEYS APPEAR NORMAL IN SIZE AND SHAPE AND SHOW NORMAL SIGNAL INTENSITY.
NO EVIDENCE OF HYDRONEPHROSIS OR FOCAL MASS LESION IS SEEN. NO FREE FLUID IN UPPER ABDOMEN.

NORMALLY DISTENDED GALL BLADDER WITH MILD DIFFUSE WALL THICKENING AND MULTIPLE INTRALUMINAL FILLING DEFECTS— SUGGESTS CHANGES OF CALCULUS CHOLECYSTITIS.

FEW LOWER CBD CALCULI WITH RESULTANT MILD DILATATION OF PROXIMAL CBD, CHD & RHD-LHD WITH PROMINENT CENTRAL IHBR.



FINDINGS

NORMALLY DISTENDED GALL BLADDER WITH MILD DIFFUSE WALL THICKENING AND MULTIPLE INTRALUMINAL FILLING DEFECTS— SUGGESTS CHANGES OF CALCULUS CHOLECYSTITIS.

FEW LOWER CBD CALCULI WITH RESULTANT MILD DILATATION OF PROXIMAL CBD, CHD & RHD-LHD WITH PROMINENT CENTRAL IHBR.

CLINICAL PROFILE

C/O ABDOMINAL PAIN ,
VOMITING

SGPT , SGOT LEVEL HIGH

PROCEDURE

MRCP, 3DFIESTA, THICK SLAB SSFSE AND AXIAL T2W IMAGES THROUGH UPPER ABDOMEN HAVE BEEN OBTAINED, ON 1.5 TELSAs 8 CHANNELS SYSTEM WITH HIGH STRENGTH GRADIENTS.

**JANUARY
EDITION**

www.usmanpuraimaging.com