

Date:17.08.2025	Patient Name:	JULIE ANN	Patient ID: 46384
Gender: F	Age: 47Y	Ref Physician: DR. KEERTHANA	

Abdominal and Pelvis Ultrasonography Examination

 The liver is normal in size and parenchymal echogenicity. Intrahepatic and extrahepatic biliary ducts are normal, no evidence of mass lesion.

Right lobe- 139mm (N= 120-160mm)

Left lobe- 96mm (N= 100 mm)

- The gallbladder is well-distended and appears normal in size. No evidence of wall thickening, polyp, lithiasis or pericholecystic fluid collection.
- Pancreas is normal in size with homogenous parenchymal echotexture, no evidence of calcification, focal lesion or peripancreatic fluid collection.
- Spleen is normal in size with homogenous parenchymal echotexture, no evidence of mass lesion.
- Both kidneys are normal in location, size and parenchymal echogenicity. Cortico-medullary differentiation is preserved, perinephric planes appear normal, no evidence of mass lesion. There are 3mm in sizes non-obstructive stones in both kidneys. The pelvicalyceal systems and ureters appear normal.

Right kidney- 109x38mm (cortex- 15mm) Left kidney - 112x48mm (cortex-15mm)

• The urinary bladder wall thickness is normal, no evidence of diverticule or abnormal mass lesion in the wall and within the urinary bladder. No calculi seen.

Urinary bladder volume=558ml

Urinary bladder Post voiding volume=27ml (5%)

- The uterus is normal in size and volume with endometrial thickness of 5mm, no evidence of mass lesion.
- There are well-defined thin-walled anechoic follicular cysts in both ovaries, measuring 28x26mm in the right side and 12x12mm in the left side.
- No evidence of free fluid within the abdominal cavity and pelvic region.
- No evidence of bowel wall thickening, intussusceptions or any sign for acute appendicitis in this
 examination.

IMPRESSION:

- There are 3mm in sizes non-obstructive stones in both kidneys.
- There are well-defined thin-walled anechoic follicular cysts in both ovaries, measuring 28x26mm in the right side and 12x12mm in the left side.

Dr. Eliass Bohlouli Kery Bozorg Specialist Radiology License No.: 00267151-001 مـركـز سيتيكير الطبي ذم م CITICARE MEDICAL CENTER LLC

Please correlate with clinical and laboratory findings. Thank you very much.

DR. Eliass Bohlouli Kery Bozorg Specialist Radiologist

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Al Salam Building, Al Barsha South, Allan Near Mirarle



