14 March 2022
Macquarie Medical Imaging
Referred By:
Dr Neomal Sandanayake
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WESTBOURNE STREET
ST LEONARDS NSW 2065

Mrs Janice Benson-Sattot
DOB: 28 April 1962
UR: CAD882Y

Our Ref: 2975376 Service Date: 14 March 2022

Copies To: Dr Alana Sinclair

Visit Description: US - ABDOMEN

ULTRASOUND ABDOMEN

CLINICAL HISTORY:

Fatty liver on previous ultrasound. ? fibrosis score. ? CAP score.

TECHNIQUE

Abdominal ultrasound study

REPORT:

Liver: The liver is normal in size measuring 11.6cm in dimension. There is diffuse increased echogenicity of the liver parenchyma. The liver contour is smooth. No focal hepatic lesion is identified. The portal vein is normal in calibre measuring 8mm with hepatopetal flow.

Pancreas: The pancreas has an unremarkable appearance.

Gallbladder: No echogenic gallstones or sludge is seen within the gallbladder. There is no gallbladder wall thickening, measures 2mm, or peri-cholecystic fluid. It was not tender upon scanning.

Biliary: Common Bile Duct at porta hepatis = 1.7mm in diameter. There is no intra-hepatic bile duct dilatation.

Kidneys: Right Kidney: 9.5 cm. Left Kidney: 9.5cm. The cortical thickness is maintained bilaterally and there is no hydronephrosis. No cysts or echogenic calculi are identified.

Spleen: Length = 6.9 cm. The spleen is not enlarged.

Aorta: Aortic Diameter = 1.5 cm. The visualised aorta is of normal calibre.

Other: No intraabdominal free fluid is seen.

CONCLUSION:

There is diffuse increased echogenicity of the liver parenchyma which may reflect hepatic steatosis. No focal hepatic lesion or evidence of liver cirrhosis is identified.

Reported by: Jeffrey Wang Performed by: A Mathew

We are now open on Saturdays and Sundays for MRI services with bulk billing available for all Medicare eligible scans.

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