MELBOURNE DIGESTIVE CENTRE

Patient details: Roshni Hussain
DOB: 13/01/1966
Medicare number:

Referring Doctor: Dr. Brindi Rasaratnam, MDC, 330 Police Road, Noble Park North, VIC 3174

Date performed:27/4/2024.

Performed by: Dr Ammar Majeed at MDC, 330 Police Rd., Noble Park North, VIC 3174.

Clinical details: Fatty liver, abnormal LFTs, assess for fibrosis

Ultrasound Technique: Verbal consent was obtained. On a Canon Medical – Aplio ultrasound machine, a convex (1-6 MHz) and a linear (4-11 MHz) probe were used to perform a targeted morphological examination of the liver for fibrosis assessment.

Results:
The liver had a smooth surface, a normal edge, and a normal echotexture. The liver was mildly steatotic. As a marker of steatosis, the Attenuation Parameter was mildly elevated at 0.66dB/cm/MHz.
Portal vein diameter was measured at 6mm. Doppler examination was performed, hepatopetal flow was demonstrated in the portal vein.
Liver stiffness measurement was obtained with a median (IQR/median ration) of 3.9(.15) kPa.
The overall quality of the examination was good.

Interpretation:
Overall, the examination is suggestive of no or minimal fibrosis (F0-F1). There is evidence of mild hepatic steatosis. Clinical correlation is needed.

Recommendations:
I have explained the examination findings to Roshni. I encouraged Roshni to lose weight. I also recommended regular exercise. Furthermore, I explained the importance of optimising metabolic risk factors.

Kind regards,
A/Prof Ammar Majeed

The non-invasive ultrasound liver fibrosis assessment is based upon findings from relevant clinical information, laboratory parameters (when provided), an abdominal ultrasound scan and liver elastography. This comprehensive process is performed to optimize the liver fibrosis assessment and should not be considered to replace the patient's other abdominal imaging requirements (such as assessment for focal liver lesions) or exclude other pathology outside the field of view.