

Patient Name :	Gender : Female
Age : 12 Y	Date : Feb 26, 2025
Referring Doctor :	Patient ID :

X-RAY RIGHT FOREARM AP, LATERAL VIEW

Khalida's Right Forearm Radiograph shows:-

FINDINGS:

There is significant bowing of the shaft of radius with resultant negative ulnar variance deformity and distorted distal radio-ulnar configuration noted.

Rest of the visualised bones appear normal.

No sclerotic / lytic lesion seen.

No fractures is seen.

IMPRESSION:

Findings of significant bowing of the shaft of radius with resultant negative ulnar variance deformity distorted distal radio-ulnar configuration.

Clinical correlation is suggested.

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Patient Name :	Gender : Female
Age : 70 Y	Date : Dec 26, 2024
Referring Doctor :	Patient ID :

X-RAY PARANASAL (PNS)

FINDINGS:

Both frontal sinuses are within normal limits
Spheno-ethmoid sinuses are within normal limits
Both maxillary sinuses are within normal limits
Medial walls of orbits are normal on both sides
Nasal septum is in midline

Bilateral hypertrophied inferior and middle nasal turbinates are seen with left side concha bullosa.

IMPRESSION:

Findings of bilateral hypertrophied inferior and middle nasal turbinates with left concha bullosa.

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Patient Name :	Gender : Female
Age : 23 Y	Date : May 29, 2024
Referring Doctor :	Patient ID :

X-RAY RIGHT MASTOID

Right Mastoid Radiograph shows:-

FINDINGS:

There is complete sclerosis of the right mastoid air cells. No obvious pneumatized air cells noted.

Visualised joints appear normal.

No fractures / dislocation seen.

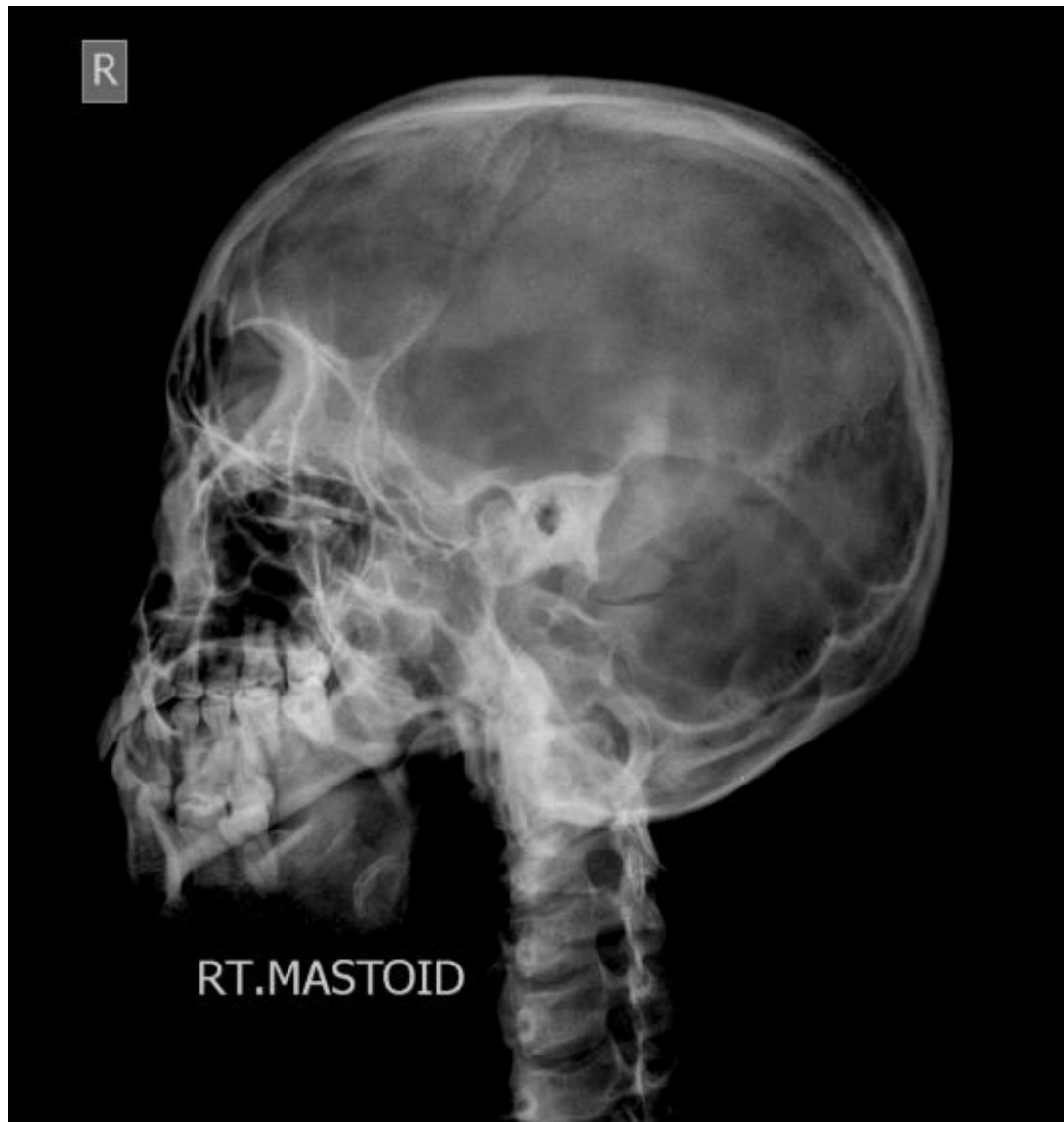
No abnormal soft tissue calcification seen.

IMPRESSION:

Findings are suggestive of sclerosing mastoiditis.

Clinical correlation is suggested.

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Patient Name :	Gender : Male
Age : 0 Y 9 M	Date : Dec 21, 2024
Referring Doctor :	Patient ID :

X-RAY PELVIS WITH BOTH HIP JOINTS

FINDINGS:

There is supero-lateral subluxation of proximal end of left femur - complete DDH.

Bilateral femoral head epiphysis are not ossified at present.

Right hip joint appears grossly normal.

Both sacro iliac joints are normal and symmetrical.

No fracture is seen.

No lytic or sclerotic lesion seen.

No bony erosion or sclerosis is seen.

IMPRESSION:

Findings of complete left DDH.

Clinical correlation is suggested.

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Patient Name :	Gender : Male
Age : 9 Y	Date : Feb 26, 2025
Referring Doctor :	Patient ID :

MCU STUDY

MCU Study shows:-

FINDINGS:

The procedure was performed by instilling sterile, dilute non-ionic contrast through the urethra and taking serial radiographs. Further, micturating shoots were taken.

RADIOLOGICAL FINDINGS:

On full bladder shoot, bladder appears normal in capacity with a smooth outline.

There is significant smooth dilatation of proximal urethra and involving the bladder neck.

No intra or extravasation of contrast is seen.

IMPRESSION:

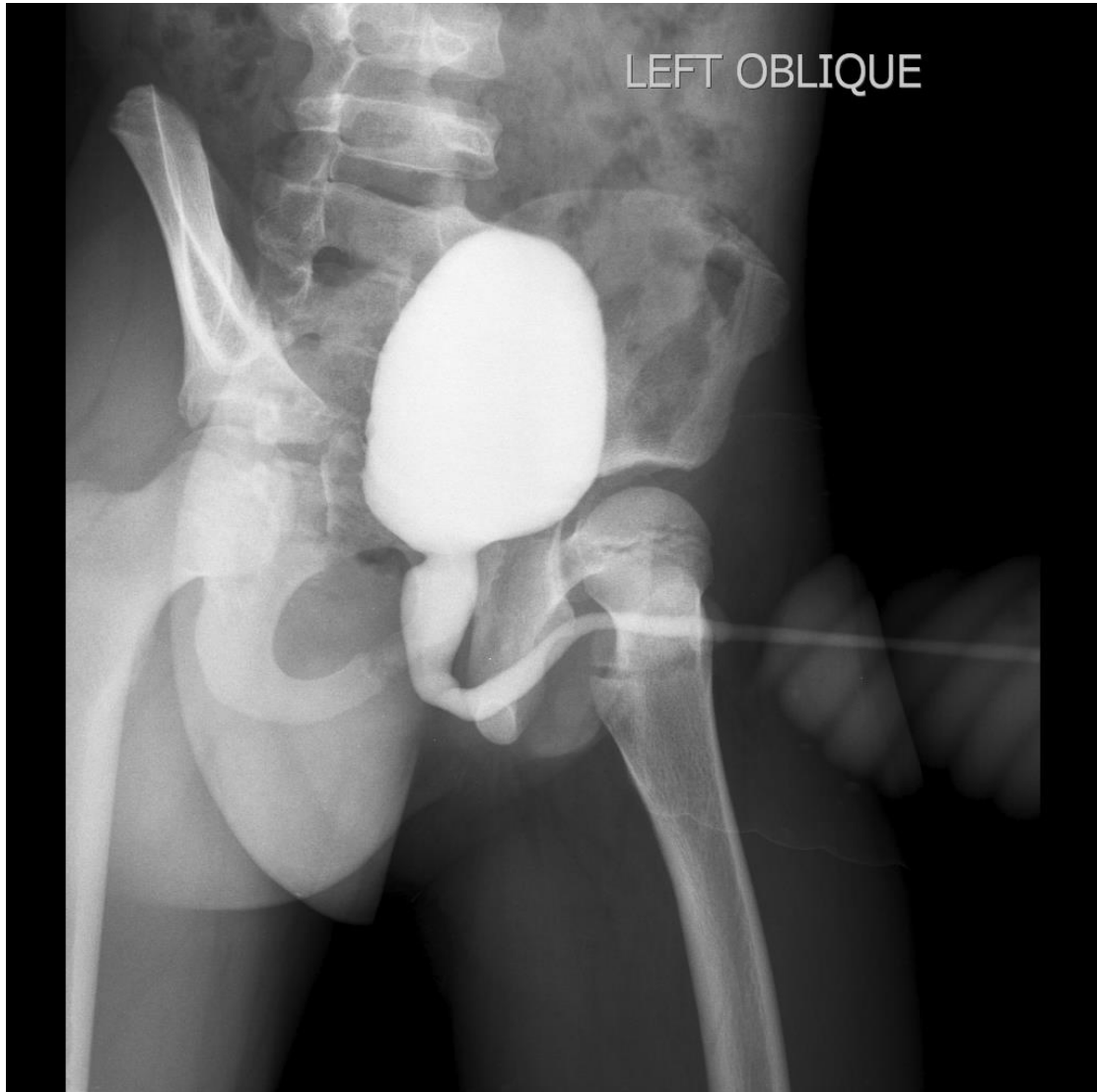
- **Findings of significant smooth dilatation of proximal urethra and involving the bladder neck - possibility of anterior urethral stricture.**
- **No evidence of posterior urethral stricture / narrowing is seen.**

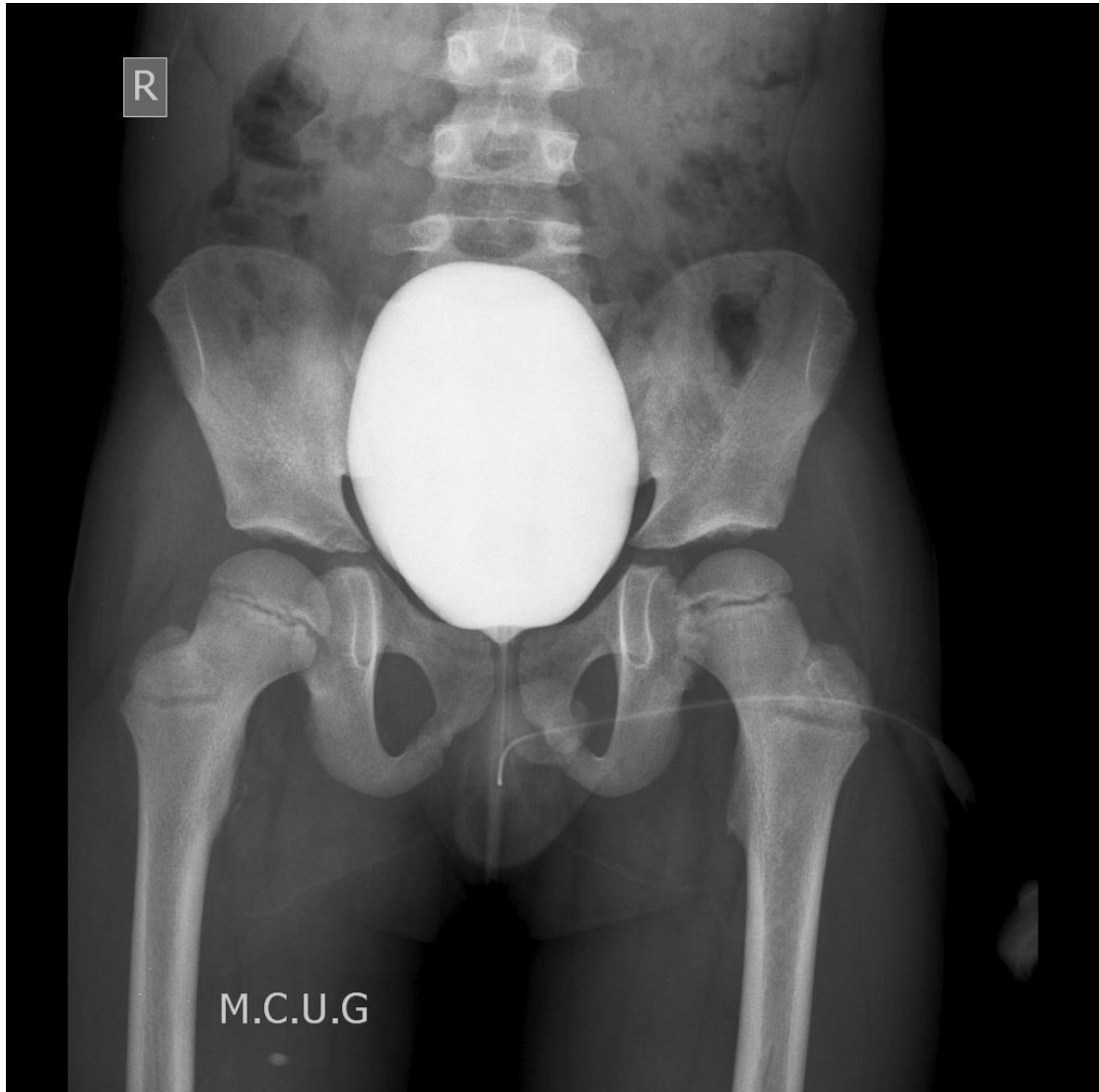
RGU correlation is suggested.

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Patient Name :	Gender : Male
Age : 80 Y	Date : Feb 09, 2025
Referring Doctor :	Patient ID :

X-RAY PELVIS WITH BOTH HIP JOINTS AP VIEW

PBH AP Radiograph shows:-

FINDINGS:

Right femoral head is severely collapsed with obliterated hip joint space and severe sclerosis of femoral head, acetabulum.

There is severe acetabular cortical thinning with intra-pelvic displacement of femoral head noted.

Diffuse sub-chondral irregularity seen involving bilateral femoral head and acetabular cavity with small sub-chondral cystic spaces and altered architecture.

There is obliterated right SI joint space.

Left hip joint is well maintained.

Soft tissue in view appears normal.

IMPRESSION:

- **Above findings are consistent with sequelae of advanced AVN involving right hip joint with with intra-pelvic displacement of femoral head.**
- **Obliterated right SI joint space.**

MRI hip correlation is suggested for further evaluation.

**Dr
MD Radiodiagnosis**

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Patient Name :	Gender : Male
Age : 80 Y	Date : Feb 09, 2025
Referring Doctor :	Patient ID :

X-RAY DORSO-LUMBAR SPINE LATERAL / AP VIEWS

FINDINGS:

Severely reduced L1-L2 intervertebral disc space with end plate sclerosis.

There is leftward lumbar scoliosis with straightening of lumbar curvature.

Vertebral bodies are normal in height and size.

Multi level small anterior and lateral marginal osteophytes noted.

Posterior elements including transverse & spinous processes appear normal.

Pre / paravertebral soft tissues appear normal.

IMPRESSION:

- **Findings of severely reduced L1-L2 intervertebral disc space with end plate sclerosis.**
- **Leftward lumbar scoliosis with straightening of lumbar curvature.**

MRI DL Spine correlation is suggested.

**Dr
MD Radiodiagnosis
Reg -**





Patient Name :	Gender : Female
Age : 70 Y	Date : Apr 20, 2024
Referring Doctor :	Patient ID :

X-RAY BOTH KNEE JOINTS AP / LATERAL VIEWS

Both Knee Joints AP / LATERAL Radiograph shows:-

FINDINGS:

Bilateral medial tibio-femoral joint spaces are severely reduced with mild end plate sclerosis.

Patello-femoral joint spaces are also reduced bilaterally.

Osteophytes are seen at bilateral medial and lateral tibio-femoral condyles, and at patellae.

Mild lateral sub-luxation of bilateral tibia with associated Genu Varum deformity.

Few loose bodies are seen at bilateral posterior tibio-femoral joints.

No lytic or sclerotic lesion seen.

There is no evidence of fracture seen.

Soft tissue reveals no abnormality.

IMPRESSION:

Findings of bilateral degenerative knee osteoarthritis (left > right) - grade IV.

**Dr
MD Radiodiagnosis
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Patient Name :	Gender : Male
Age : 36 Y	Date : Aug 08, 2024
Referring Doctor :	Patient ID :

X-RAY LEFT FOOT AP / LATERAL VIEW

Left Foot Radiograph shows:-

FINDINGS:

There is extra-articular displaced fracture of the neck of 5th metatarsal.

Note is made of small accessory ossicle at cuboid.

Rest of the visualised bones appear normal

No sclerotic / lytic lesion seen

Visualised joints appear normal

IMPRESSION:

Findings of extra-articular displaced fracture of the neck of 5th metatarsal.

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Patient Name :	Gender : Female
Age : 40 Y	Date : Feb 19, 2025
Referring Doctor :	Patient ID :

INTRAVENOUS PYELOGRAPHY (IVP) STUDY **REVEALS -**

IVP Done after injecting of non-ionic contrast I.V.

FINDINGS:

X-RAY K.U.B.

RADIOLOGICAL FINDINGS:

No abnormal radio-opaque shadow is seen in the KUB system.
Bilateral renal shadows appear normal.
Bilateral Psoas shadows appear normal.
Visualized Bones appear normal.

X-RAY I.V.P.

RIGHT KIDNEY shows prompt uptake, concentration and excretion of the contrast. **There is moderate dilatation of the pelvicalyceal systems with blunting of calyces and zone of transition seen at the PUJ - suggestive of PUJ obstruction. The distal 1/4th of ureter appears bifid and appears separately draining into the bladder.**

LEFT KIDNEY shows prompt uptake, concentration and excretion of contrast. **There is two separate collecting system with complete double ureters draining into the urinary bladder. There is moderate dilatation of lower moiety with blunting of calyces showing narrow zone of transition at the PUJ - PUJ obstruction. No evidence of any calculus is seen.**

URINARY BLADDER appears normal in size, shape and contour.

IMPRESSION:

- Findings of left complete duplex collecting system with double ureters.
- PUJ obstruction involving the left lower moiety causing moderate hydronephrosis as described above.
- Right PUJ obstruction causing moderate hydronephrosis as described above.
- Atypical right bifid ureter involving the distal 1/4th with associated distal hydroureter.

CT urography correlation is suggested for further evaluation.

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Patient Name :	Gender : Female
Age : 27 Y	Date : Jan 26, 2025
Referring Doctor :	Patient ID :

HSG STUDY

HSG Study shows:-

FINDINGS:

HSG

Procedure of HSG was performed by injecting sterile non-ionic contrast through cervix under aseptic precautions and taking serial radiographs

Uterine cavity appears normal in size, shape and position.

No evidence of any congenital anomaly, external pressure impression or filling defect is noted.

Left fallopian tube is well opacified and appears normal in course and calibre. Restricted intra-peritoneal spillage of contrast is seen.

Right fallopian tube is opacified by contrast upto the distal part, beyond which no evidence of free spillage of contrast seen.

There is intravasation of contrast seen in parametrial veins and into bilateral pelvic veins.

IMPRESSION:

- Findings are suggestive of left peritubal adhesion and right distal tubal block.
- Intravasation of contrast in parametrial veins and into bilateral pelvic veins.

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Patient Name :	Gender : Male
Age : 65 Y	Date : Dec 23, 2024
Referring Doctor :	Patient ID :

BARIUM SWALLO STUDY

Barium Study shows:-

FINDINGS:

Serial film were taken after giving oral barium contrast.

Diffuse luminal mucosal irregularity seen involving the visualized entire esophagus.

There is long segment mild luminal narrowing with severe irregularity seen involving the left lateral aspect of distal esophagus. Involved segment measures approx 10 cm in length.

GE junction appears normal.

No evidence of hiatus hernia.

IMPRESSION:

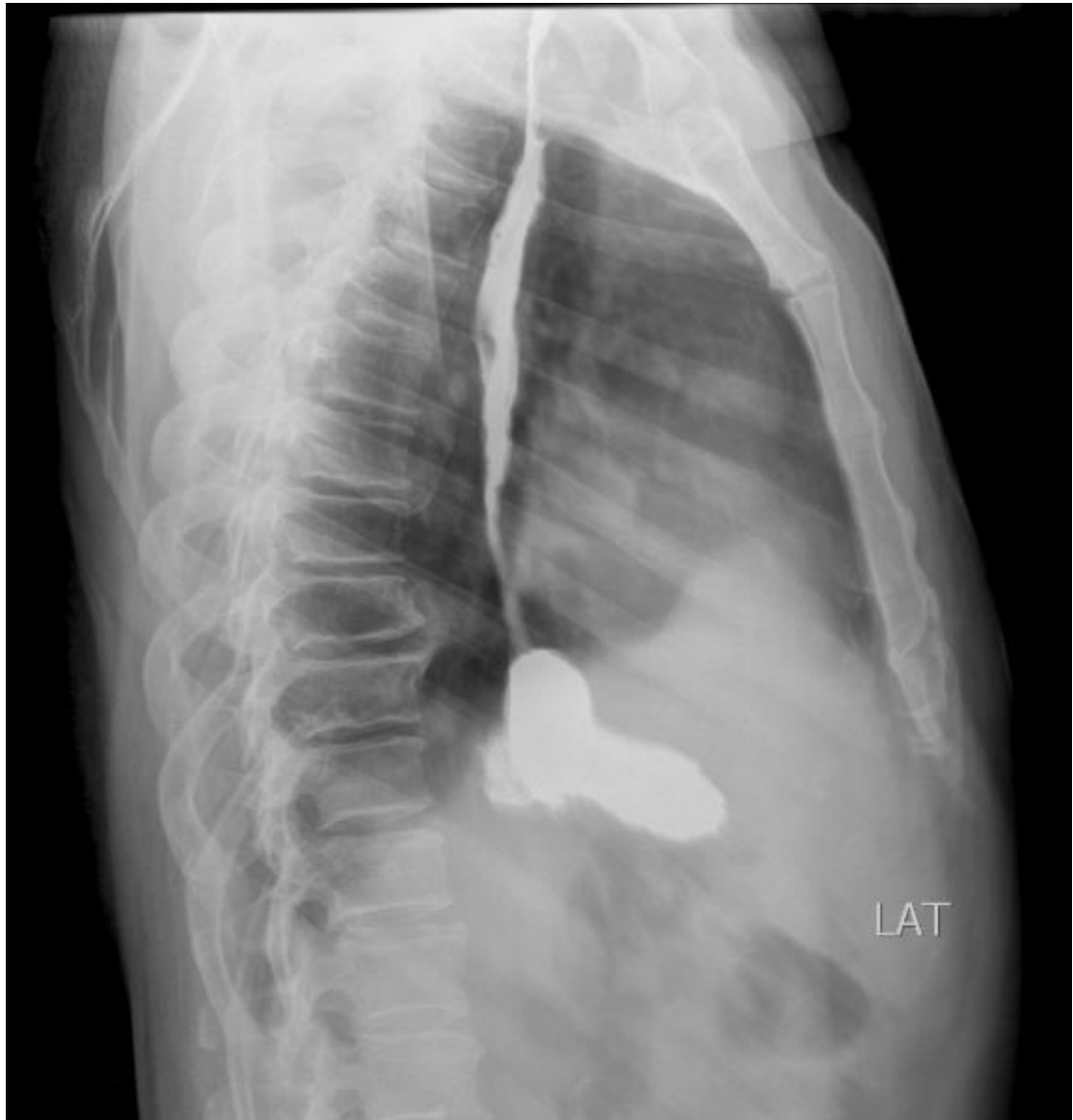
- **Findings of long segment mild luminal narrowing with severe irregularity involving the left lateral aspect of distal esophagus - ? malignant.**
- **Features of diffuse esophagitis.**

Upper GI endoscopy correlation is suggested.

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Patient Name :	Gender : Male
Age : 36 Y	Date : Jan 28, 2025
Referring Doctor :	Patient ID :

X-RAY FISTULOGRAM

FINDINGS:

FISTULOGRAM

Skiagrams have been taken after injecting radio-opaque contrast through a cannula inserted in the sinus opening.

External opening is seen at peri-anal region.

There is focal accumulation of contrast seen in the perianal region. No evidence of extending tract is seen in relation to this.

No evidence of sub-tract is seen.

No obvious communication with the underlying bones or bowel loop is seen.

IMPRESSION:

Findings are suggestive of peri-anal abscess with external opening.

MRI and clinical correlation is suggested.

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