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MARTIN, DIEHL HAROLD	2033675	08/09/2007	08/09/2007 09:53:33
Patient Name	MR#	Observation Date	Last Edited Date

Result Type:

CT Chest with contrast

Reason For Exam:

PANCREATIC EVAL

REPORT OF EXAM::

Chest CT with contrast.

Clinical indication: Pancreatic cancer

CT technique: 5 mm axial images were obtained through the chest after the uneventful administration of intravenous contrast.

Findings: Comparison exam 05/07/07.

Index lesions as follows:

1. The left upper lobe nodule currently measures 0.5 x 0.3 cm (image 28), compared with 0.7 x 0.3 cm previously (image 135).
2. Right upper lobe pleural based density currently measures 0.8 x 0.4 cm (image 37), compared with 0.6 x 0.5 cm previously (image 142).

The pleural effusions have improved with only a tiny right pleural effusion persisting. Airspace consolidation within the lower lobes, worse on the right, has also improved. There is persistent septal and peribronchovascular interstitial thickening, increased slightly. Filling defects are noted within the left lower lobe pulmonary artery, consistent with pulmonary emboli. No pathologic mediastinal lymphadenopathy is seen. There are new sclerotic lesions seen in the T4 and T5 vertebral bodies with no significant change in the appearance of several other vertebral body metastases. Manubrial metastases are again noted as well as new sclerotic lesions involving the left anterior fourth and right anterior fifth ribs. Abdomen findings will be reported separately.

Impression:

1. Left lower lobe pulmonary embolus.
2. Worsening skeletal metastases and lymphangitic carcinomatosis.
3. Stable scattered tiny pulmonary nodules with resolving lower lobe airspace consolidation and improving effusions.

Dr. Posey was notified of these findings at 9:55 a.m. on the day of the examination.

Final Report

Interpreted by: Watts, Jubal R

Title: MD

Signed Date/Time: 08/09/07 09:53

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