

<b>Patient Name:</b>	MRS. G. VIJAYA	<b>MR No:</b>	555
<b>Age:</b>	30 Years	<b>Location:</b>	KAVACH DIAGNOSTICS
<b>Gender:</b>	F	<b>Physician:</b>	AIIMS
<b>Image Count:</b>	1353	<b>Date of Exam:</b>	08-Nov-2023
<b>Arrival Time:</b>	08-Nov-2023 13:19	<b>Date of Report:</b>	

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## CECT NECK

### Findings:

The visualized sections of the nasopharynx, oropharynx and laryngopharynx show normal configuration and morphology.

No mass lesion or extrinsic compression of the air columns is noted.

The epiglottis, valleculae and pyriform fossa are normal.

No abnormality is seen in the vocal cords or larynx.

The visualized visceral, retropharyngeal, parapharyngeal, prevertebral and carotid spaces of the neck show normal configuration and densities.

The parotid and submandibular salivary glands appear normal on both sides.

Both carotid arteries and internal jugular veins appear normal.

No significantly enlarged lymph nodes are seen in the neck.

Both lobes and isthmus of the thyroid gland show normal configuration and densities.

**There is a well-defined lobulated heterogenous density soft tissue lesion in left superior paratracheal region just below left lobe of thyroid. It shows scattered calcific foci and few cystic areas. Approx. size measures 31 x 23 x 33 mm.**

**The lesion is displacing trachea posterolaterally to right side. It also compresses esophagus posteriorly. There is lack of fat plane between the lesion and inferior surface of left thyroid lobe.**

The thyroid cartilage, cricoid cartilage and trachea are normal.

Visualized sections of base of skull and cervical spine appear normal.

No lytic sclerotic lesion is seen.

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## Impression

**Well-defined lobulated heterogeneous density soft tissue lesion in left superior paratracheal region just below left lobe of thyroid with loss of fat plane between the lesion and thyroid suggests possibility of thyroid origin – thyroid nodule cannot be ruled out.**



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**Consultant Radiologist**  
**Reg G-66357**

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### PLEASE NOTE:

This radiological report is the professional opinion of the reporting radiologist based on the interpretation of the images and information provided at the time of reporting. It is meant to be used in correlation with other relevant clinical findings.