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REFERRED BY:	VARUNAM HOSPITAL		

SPIRAL CT SCAN – WHOLE ABDOMEN

Protocol- 5 mm Axial sections of Whole Abdomen. Oral contrast was given.
IV contrast – 50 ml non-ionic. Mode – Spiral.

The study reveals mild enlarged liver with multiple hepatic parenchymal discrete lesions showing mild enhancement in arterial phase and remain hypodense in porto-venous phase. Intervening hepatic parenchyma and hepatic vascular radicles appears normal.

Mild free fluid noted in peritoneal recess.

Pre-antral gastric short segmental mild thickening measuring 1 cm in thickness involving a segment measuring 2.2 cm.

Gall bladder show normal distension with no intra-luminal lesion. Wall appears normal.

Intra-extra hepatic biliary system show normal configuration. No abnormal dilatation.

Pancreas shows normal size, shape and attenuation. Peri-pancreatic fat plane is well maintained. No focal lesion or calcification. Pancreatic duct is normal.

Spleen shows normal size and uniform post contrast enhancement. No focal lesion.

Both kidneys show normal size, shape and position with uniform post contrast enhancement. No focal lesion. Pelvicalyceal system appears normal. Visualized ureters are normal in course and caliber. Perinephric spaces appear normal.

Small and large bowels show optimum opacification by oral contrast. No associated lesion. Mesentery & mesocolon show normal attenuation and no focal lesion.

Uterus is bulky in size with posterior cervical illdefined lesion measuring 2.7 cm. Left ovarian small cyst of size 2.7 cm. Right ovary appears normal. Adnexae reveal no abnormality.

Aorta and IVC are normal appearing.

Visualized skeleton is unremarkable.

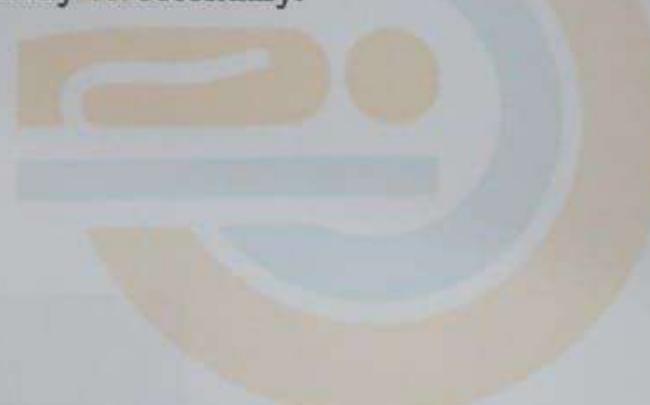
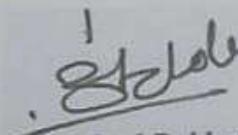
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IMPRESSION: Spiral CT scan study of whole abdomen reveals -

- Mild to moderate hepatomegaly with multiple hepatic parenchymal discrete lesions appears hepatic metastasis.
- Periportal, retro-pancreatic and retro-peritoneal few small enlarged nodes appears metastatic.
- Mild pelvic ascites.
- Illdefined posterior cervical lesion appears fibroids vs. polyp.
- Left ovarian small atypical cyst appears hemorrhagic.
- Pre-antral gastric short segmental mild thickening. To be SOS correlated with scope and cytopathology.
- Right lobe basal segmental small discrete nodular lesion measuring 1.9 cm appears primary vs. secondary.



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