



M. Abdul Rafig

55 M

[21-08-24]

ECOG-1

Recently diagnosed HTN
c/o generalised weakness

X-ray chest - ① gross pleural effusion

USG (CTP): Huge cystic lesion & extensive separation in ① pleural space occupying ① hemithorax.
(17.3 x 15 x 10 cm)

Single small lesion - ① lobe of liver
minimal aches

Adv

- PBT-CT → meg kreas
liver aches
multiple bone aches

Slide - A1184626
Block - A1184627



MEGAVISION LABS

The Histopathology Specialist

"Millennium Star", 3rd & 4th Floor, Office No. 305 & 410, Near Ruby Hall Clinic,
Dhole Patil Road, Pune - 411 001. ☎ : 8698649008 / 7276136936 Timing : 8.00 am. to 8.00 pm



Speciality centre for Oncopathology, Immunohistochemistry, Renal Biopsies (with immunofluorescence), FNAC, Frozen Section



19299 040924

Name : MR. RAFIQ ABDUL
Age/Sex : 55 Yrs. / M
Ref. By : Dr. Satish Shekde M.D (Path)
Source : Shekde Path Lab (Jalna)

Lab ID : 19299
Sample Date : 04/09/2024 16:48:25
Report Date : 06/09/2024 15:27:18
HPE No : M10174/24

HISTOPATHOLOGY REPORT

Specimen : CT guided biopsy left intercostal nodule (slide & block for opinion)

Clinical : Left intercostal nodule, ? Lung tumor, ? Mesothelioma.

Gross : Received one stained slide & one paraffin block labelled as S-938/24 for opinion.

Diagnosis : **CT guided biopsy left intercostal nodule (slide & block for opinion) -**
- Possibilities include : 1) Adenocarcinoma, 2) Mesothelioma.

Note : Advise IHC for complete evaluation

----- End Of Report -----

Dr. Swapnil V.

Karnik
M.D.(Pathology)
Regd No: 70140

Note : Paraffin blocks are returned with the report. • NABL accreditation as per ISO 15189:2012 Cert No. : MC - 5623 Refer Scope@ www.nabl-india.org

 Dr. Swapnil V. Karnik MD

Director, Oncopathologist & Renal
Histopathologist Ex Consultant CMC
Vellore (Tamil Nadu)

Page 1 of 1

Dr. Bhushan V. Khedkar MD

Director, Oncopathologist Ex-Tata Memorial
Hospital, Mumbai

Dr. Pradnya Manglekar DNB

Fellowship Nephropathology

Dr. Deepti Sali DNB

Consultant Histopathologist

Ratna

Diagnostic & Research Center

Near Shani Mandir, Kacheri Road,
Old Jalna. Ph.: 233944

- 3D, 4D, HD Live
- Colour Doppler
- Digital X-Ray
- Sonography

Name: Mr. ABDUL RAFIQ
Age: 55 Y

Sex: M

Date: 20-Aug-2024

Ref By: Dr.(Mrs.) SHAHENAZ SHAIKH BHMS.,CGO.

USG ABDOMEN

LIVER : IS NORMAL IN SIZE & ECHOTEXTURE. SINGLE SMALL LESION [12.4 X 9.6 MM] WITH PERIPHERAL HYPOECHOIC & CENTRAL MILDLY ECHOGENIC ECHOTEXTURE IN LT LOBE LIVER. NO E/O INTRAHEPATIC & BILIARY RADICAL DILATATION.

GALL BLADDER : NO E/O CALCULUS / SLUDGE. WALL THICKNESS IS NORMAL. NO PERICOLECYSTIC COLLECTION.

SPLEEN & PANCREAS : DO NOT SHOW ANY ABNORMALITY.

KIDNEYS : BOTH KIDNEYS ARE NORMAL IN SIZE, SHAPE & POSITION. PARENCHYMAL ECHOCOGENICITY & THICKNESS IS NORMAL. NO CALCULI / HYDRONEPHROSIS. HUGE CYSTIC LESION [17.3 X 15.0 X 10.0 CM] WITH EXTENSIVE SEPTATIONS LT PLEURAL SPACE WITH COLLAPSE OF LT LUNG.

BLADDER : IS WELL FILLED. NO CALCULUS / CYSTITIS. NO SIGNIFICANT POST VOID RESIDUE.

PROSTATE : IS NORMAL IN SIZE & ECHOTEXTURE.

OTHER FINDINGS : MINIMAL ASCITIS. NO INTRAABDOMINAL LYMPHADENOPATHY. HUGE CYSTIC LESION [APROX. 17.3 X 15.0 X 10.0 CM] WITH EXTENSIVE SEPTATIONS IN LT PLEURAL SPACE ACCUPYING ALMOST COMPLETE LT HEMITHORAX WITH COMPRESSION COLLAPSE OF LT LUNG.

RK = 9.1 X 4.3 CM LK = 9.5 X 5.0 CM SPLEEN = 8.8 CM

PROST = 3.9 X 1.8 X 2.2 CM

IMPRESSION : HUGE CYSTIC LESION [APROX. 17.3 X 15.0 X 10.0 CM] WITH EXTENSIVE SEPTATIONS IN LT PLEURAL SPACE ACCUPYING ALMOST COMPLETE LT HEMITHORAX WITH COMPRESSION COLLAPSE OF LT LUNG.

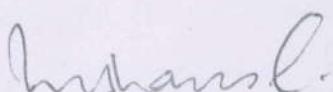
: SINGLE SMALL LESION [12.4 X 9.6 MM] WITH PERIPHERAL HYPOECHOIC & CENTRAL MILDLY ECHOGENIC ECHOTEXTURE IN LT LOBE LIVER ? METASTASES.

: MINIMAL ASCITIS.

: NO CALCULI / HYDRONEPHROSIS.

SUGGEST : X RAY CHEST PA VIEW.

: CECT ABDOMEN FOR HEPATIC LESION EVALUATION.



Dr. Jayprakash Bhansali
M.D. (Radiology)
CONSULTANT SONOLOGIST & RADIOLOGIST



Speciality centre for Oncopathology, Immunohistochemistry, Bone Marrow and Cytogenetics, Path, Molecular Genetics



19299 040924

Name : MR. RAFIQ ABDUL
Age/Sex : 55 Yrs. / M
Ref. By : Dr. Satish Shekde M.D (Path)
Source : Shekde Path Lab (Jain)

Specimen ID : 19299 040924
Sample Date : 04/09/2024 10:45:00
Report Date : 05/09/2024 15:27:18
HPE No : MH10174/24

HISTOPATHOLOGY REPORT

Specimen : CT guided biopsy left intercostal nodule (slide & block for opinion)
Clinical : Left intercostal nodule, ? Lung tumor, ? Mesothelioma.
Gross : Received one stained slide & one paraffin block labelled as S-938/24 for opinion.
Diagnosis : CT guided biopsy left intercostal nodule (slide & block for opinion) -
- Possibilities include : 1) Adenocarcinoma, 2) Mesothelioma.
Note : Advise IHC for complete evaluation.

End of Report

Dr. Swapnil V.

Karnik

M.D.(Pathology)

Regd No: 70140

Note : Paraffin blocks are returned with the report. • NABL accreditation as per ISO 15189:2012 Cert No. : MC - 5623 Refer Scope@ www.nabl-india.org

Dr. Swapnil V. Karnik MD

Director, Oncopathologist & Renal
Histopathologist, Ex-Consultant CMC
Vellore, Tamil Nadu

Page 1 of 1

megavisionlabs@gmail.com

Dr. Bhushan V. Khedkar MD

Director, Oncopathologist Ex-Tata Memorial
Hospital, Mumbai

Dr. Pradnya Manglekar DNB

Fellowship Nephropathology

Dr. Deepti Sali DNB

Consultant Histopathologist

www.megavisionlabs.com

CIN : U74999PN2016PTC165244



Solaris Medicare

DIAGNOSTICS PVT. LTD.

EXCELLENCE | EVERY PATIENT | EVERY TIME

Behind Khurana Travels, Near Chunnilal Petrol Pump
Adalat Road, Chh. Sambhajinagar-431001
Ph. : 0240-236 3388 / 236 3389
Email : solarismedicare@gmail.com

Patient Name: ABDUL RAFIK **Scan Number:** 20240822/270

Age: 55 **Sex:** Male

Date: 22/08/2024

Referred By:- Dr Shakunt Kothari, Deepak Karakinos Cancer Center, Jalna.

* Contrast filled bowel loops are normal.

Musculoskeletal:

- * Abnormal increased FDG tracer uptake noted in multiple lytic sclerotic lesions involving following skeleton:-
 - a) Sternum & right scapula (SUV Max 5.2),
 - b) Left 6th rib laterally (SUV Max 10.1),
 - c) Bilateral iliac bones, right acetabulum and inferior pubic ramus (SUV Max 8.1),
 - d) Multiple dorsolumbar & sacral vertebrae (SUV Max 12.8).

CONCLUSION:-

- * FDG AVID HETEROGENEOUSLY ENHANCING NODULAR SOFT TISSUE THICKENING WITH IRREGULAR MARGINS & INTERNAL SEPTATIONS INVOLVING ENTIRE LEFT HEMITHORAX WITH ASSOCIATED MARKED PLEURAL EFFUSION – SUGGESTIVE OF METABOLICALLY ACTIVE PRIMARY MALIGNANCY.

WARRANTS CLINICAL AND HISTOPATHOLOGICAL CORRELATION

- * FDG AVID MULTIPLE ENLARGED LEFT AXILLARY LYMPH NODES – SUGGESTIVE OF LYMPH NODAL METASTASES
- * FDG AVID HYPODENSE LESION NOTED INVOLVING LEFT LOBE OF LIVER – POSSIBILITY OF HEPATIC METASTASES IS LIKELY.
- * FDG AVID MULTIPLE LYtic SCLEROTIC LESIONS INVOLVING SKELETON AS DESCRIBED – SUGGESTIVE OF SKELETAL METASTASES
- * NO EVIDENCE OF ANY OTHER FDG AVID LYMPH NODAL / DISTANT METASTATIC DEPOSITS.

Dr.PAVAN SHEVGAN
MBBS,DMRE,DNB(NUCLEAR MED), MNAMS

Patient Name: ABDUL RAFIK Scan Number: 20240822/270

Age: 55 Sex: Male

Date: 22/08/2024

Referred By:- Dr Shakunt Kothari, Deepak Karakinos Cancer Center, Jalna.

* Contrast filled bowel loops are normal.

Musculoskeletal:

- * Abnormal increased FDG tracer uptake noted in multiple lytic sclerotic lesions involving following skeleton:-
 - a) Sternum & right scapula (SUV Max 5.2),
 - b) Left 6th rib laterally (SUV Max 10.1),
 - c) Bilateral iliac bones, right acetabulum and inferior pubic ramus (SUV Max 8.1),
 - d) Multiple dorsolumbar & sacral vertebrae (SUV Max 12.8).

CONCLUSION:-

* FDG AVID HETEROGENEOUSLY ENHANCING NODULAR SOFT TISSUE THICKENING WITH IRREGULAR MARGINS & INTERNAL SEPTATIONS INVOLVING ENTIRE LEFT HEMITHORAX WITH ASSOCIATED MARKED PLEURAL EFFUSION – SUGGESTIVE OF METABOLICALLY ACTIVE PRIMARY MALIGNANCY.

WARRANTS CLINICAL AND HISTOPATHOLOGICAL CORRELATION

* FDG AVID MULTIPLE ENLARGED LEFT AXILLARY LYMPH NODES – SUGGESTIVE OF LYMPH NODAL METASTASES

* FDG AVID HYPODENSE LESION NOTED INVOLVING LEFT LOBE OF LIVER – POSSIBILITY OF HEPATIC METASTASES IS LIKELY.

* FDG AVID MULTIPLE LYtic SCLEROTIC LESIONS INVOLVING SKELETON AS DESCRIBED – SUGGESTIVE OF SKELETAL METASTASES

* NO EVIDENCE OF ANY OTHER FDG AVID LYMPH NODAL / DISTANT METASTATIC DEPOSITS.

P
.....

Dr.PAVAN SHEVGAN
MBBS,DMRE,DNB(NUCLEAR MED), MNAMS

Swapnil
H02/17/24

MEGAVISION LABS

The Histopathology Specialist

DHL 323/24



"Millennium Star", 3rd & 4th Floor, Office No. 305 & 410, Near Ruby Hall Clinic,
Dhole Patil Road, Pune - 411 001. (: 8698649008 / 7276138904 Timing : 8.00 am. to 8.00 pm

Speciality centre for Oncopathology, Immunohistochemistry, Renal Biopsies (with immunofluorescence), FNAC, Frozen Section



19299 040924
Name : MR. RAFIQ ABDUL
Age/Sex : 55 Yrs. / M
Ref. By : Dr. Satish Shekde M.D (Path)
Source : Shekde Path Lab (Jalna)

Lab ID : 19299
Sample Date : 04/09/2024 16:48:25
Report Date : 06/09/2024 15:27:18
HPE No : M10174/24

HISTOPATHOLOGY REPORT

Specimen : CT guided biopsy left intercostal nodule (slide & block for opinion)
Clinical : Left intercostal nodule, ? Lung tumor, ? Mesothelioma.
Gross : Received one stained slide & one paraffin block labelled as S-938/24 for opinion.
Diagnosis : **CT guided biopsy left intercostal nodule (slide & block for opinion) -**
- Possibilities include : 1) Adenocarcinoma, 2) Mesothelioma.
Note : Advise IHC for complete evaluation

----- End Of Report -----

Please issue blocks

Swapnil

Dr. Swapnil V.



Karnik
M.D.(Pathology)
Regd No: 70140

Paraffin blocks are returned with the report. • NABL accreditation as per ISO 15189:2012 Cert No. : MC - 5623 Refer Scope@ www.nabl-india.org

Swapnil V. Karnik MD

• Oncopathologist & Renal
athologist Ex Consultant CMC
(2000-2004)

Dr. Bhushan V. Khedkar MD

Director, Oncopathologist Ex-Tata Memorial
Hospital, Mumbai

Dr. Pradnya Manglekar DNB

Fellowship Nephropathology

Dr. Deepti Sali DNB

Consultant Histopathologist