



Patient ID : CT - 179  
Patient Name : YOGENDRA YADAV  
Test Name : HRCT CHEST  
Referred By : ANAND LOK HOSPITAL

Test Type : CT  
Age/Gender : 060Y/M  
Test Done On : 12-10-2024  
Reported On : 12-10-2024

### CT – CHEST PLAIN

#### STUDY PROTOCOL:

Axial 5mm cuts were identified from the thoracic inlet down to the upper poles of the kidneys.

#### HISTORY:

#### FINDINGS:

There is evidence of large ill defined homogenous soft tissue density mass lesion of approx size 8.2 x 9.4 x 11.2 cm (AP x TR x SI) is seen in anterior mediastinum on right side. It is seen extending cranially from superior aspect of D1 vertebra to caudally till inferior border of D4 vertebra.

- Medially it seen abutting the arch of aorta, ascending aorta, pulmonary trunk and trachea. It is causing compression of trachea leading to narrowing of lumen of trachea.
- Anteriorly it is reaching upto anterior chest wall.
- Inferiorly it is abutting the right mainstem bronchi.
- Posteriorly it seen reaching upto prevertebral space on right side.
- Multiple lymph nodes are seen in bilateral visualised part of cervical and left paratracheal region.
- Large nodal lesions also seen in the subcarinal region.

Multiple enlarged lymph nodes seen in bilateral axilla region with largest node measuring 50 x 42mm seen in left axillary region.

Irregular nodular thickening of pleura seen in posterior aspect of chest on right side  
?Metastasis.

Homogenous nodular lesion of size 27 x 25mm seen in subpleural region of right middle lobe  
?Metastasis.

The minor and major fissures are well delineated with no evidence of fissural displacement.

The distribution of the bronchial and vascular structures within the lungs is normal.

The mediastinum is centered and of normal width. There is no evidence of masses in the anterior, central or posterior compartments.

The heart is orthotopic with normal configuration. The cardiac chambers are of normal size.

No significant pericardial thickening.

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No abnormal wall thickening / dilatation of the thoracic esophagus is seen.

The bones of the thoracic cage and the vertebrae do not reveal significant abnormality.  
Superficial soft tissues of the chest wall appear normal.

Upper part of the liver, spleen and adrenals included in the study show no obvious abnormality.

**IMPRESSION:**

There is evidence of large ill defined homogenous soft tissue density mass lesion of approx size 8.2 x 9.4 x 11.2 cm (AP x TR x SI) is seen in anterior mediastinum on right side. It is seen extending cranially from superior aspect of D1 vertebra to caudally till inferior border of D4 vertebra. Findings s/o Mitotic etiology, Likely Mediastinal Lymphoma. advice CECT CHEST and Histopathology for further evaluation.

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