

OPD Progress Note & Treatment Sheet

Mr. Ankush Harishchandra Dhengale
Age - 70 Yr M

Date & Time	Progress Note & Treatment
<p>03/12/25</p>	<p>Mr. Ankush Dhengale (70 Yr M)</p> <p>Patient (100%) @ 10 Yr My 1st (57. cell carcinoma)</p> <p>↓</p> <p>Patient Underwent</p> <ol style="list-style-type: none"> 1. (P) Hemiglossectomy 2. (P) MND (E) <p>specimen for (HPE)</p> <p>Dr. Shivaji Salunke DrNB Surgical Oncology Reg. No. - 2024020762</p>

50-044.

23 A2110649

12A2110650.

Pushpan Imaging Centre

• 1.5 Tesla MRI • 96 Slice CT Scan (Technically), Digital X-Ray • Ultrasonography • Colour Doppler, Digital OP

Patient Name : MR. DHENGAL ANKUSH HARISHCHANDRA
Ref. By : Dr. SALUNKE SHIVAJI MBBS DNB [GEN SUR] DrNB SUR.ONCO

Age/Sex : 70 Yrs./M
Date : 31-Jan-2025

CEMRI NECK

MRI of the neck performed using dedicated neck coil on 1.5T unit. SE T1 weighted images were obtained in axial & coronal planes. FSE T2 weighted images were obtained in sagittal & coronal planes. STIR images were obtained in coronal plane. T2 FS weighted images were obtained in axial plane.

OBSERVATIONS:

There is a T1 isointense, T2 mildly hyperintense enhancing lesion centered in the in the right mid and posterior aspect of the oral tongue. It measures approximately 18x15mm (APxCC) with maximum depth of invasion is 13mm. The fat plane with right genioglossus muscle appears lost, however it is not crossing the midline.

Multiple enlarged lymph nodes are noted at cervical level at IA and IB and II on both sides, largest of size 8mm on right and 9mm on left.

The study reveals normal anatomical configuration of the visualised naso-pharynx & oro / laryngo pharyngeal regions with no obvious distortion of the pharyngeal airways.

The sub mandibular & Rest of the parotid glands under view appear essentially normal and reveal normal signal morphology. No obvious mass lesion could be seen.

Left Epiglottis; pre epiglottic space / epiglottic valleculae and the left base of tongue appear unremarkable.

Hypo pharynx; pyriform sinuses & the laryngeal inlet reveal normal anatomical configuration.

Pharyngo-epiglottic folds appear unremarkable.

Laryngeal vestibule; vestibular folds / vocal cords and the anterior / posterior commissures appear essentially normal.

Maxilla & the mandible under view appear normal.

Hyoid bone and thyroid / cricoid cartilages appear unremarkable.

Thyroid gland & the trachea under view appear unremarkable.

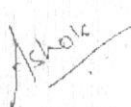
Vascular structures under view display normal flow voids & appear normal in course/calibre.

Muscles & Rest of the soft tissues under view appear normal.


IMPRESSION: In this known case of CA tongue

- Focal lesion in the right lateral tongue, in the mid and posterior aspect with extension as described s/o malignant neoplastic aetiology - Ca Tongue. Suggested histopathological correlation.
- Few prominent cervical lymph nodes at IA, IB and II on both sides as described-Likely reactive

Please correlate clinically & with other relevant investigations also.


Dr. ASHOK SHARMA .
MD RADIOLOGY
Reg.No.2017040928

Disclaimer: Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly


Dr. Vivekanand N. Janra
M.D. (Radiodiagnosis)
Radiologist & Sonologist
Regd. No.: 681

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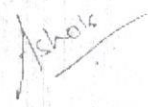
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- Focal lesion in the right lateral tongue, in the mid and posterior aspect with extesion as decsribed s/o malignant neoplastic aetiology - Ca Toungue. Suggedt hisopathological correlation.
- Enlarged cervical lymph nodes at IA, IB and II on both sides as described-Likely metastatic.

Please correlate clinically & with other relevant investigations also.


Dr. ASHOK SHARMA .
MD RADIOLOGY
Reg.No.2017040928

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Dr. Vivekanand N. Janri
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Radiologist & Sonolog
Regd. No.: 681



DR. SAKHARE PATHOLOGY LAB

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Dr. Gaurav Sakhare
M.D. Pathology (Mumbai)

Patient Name : Ankush Dengale

Block No.: 25JN164

Referred by: Dr. Siddheshwar Shiral MS ENT

Age / Sex : 70yr/M

Ref. No.: 6701/25

Reg. Date : 20/01/2025

Histopathology Report

Gross :

Biopsy of tongue lesion.

Received multiple tissue bits, grey white. Processed completely.

Microscopy :

H & E stained section from completely processed biopsy revealed

Mucosa show hyperplastic dysplastic stratified squamous epithelium.

At places show submucosa with focal invasion of dysplastic squamous cells having large pleomorphic hyperchromatic nuclei, prominent nucleoli and scant to moderate amount of cytoplasm.


Chronic inflammatory infiltrate around invasive focus in submucosa and other areas also noted.

Impression :

Biopsy from Tongue Lesion Revealed

Focal Invasive Squamous Cell Carcinoma

End of Report


Dr. Gaurav Sakhare
M.D. Pathology
Reg. No. 2007/10.3729

Note :- Reported as per specimen received. Remaining specimen if any will be discarded after 1 month. Paraffin blocks with slides will be discarded after 6 months.