

Patient ID	CIMS-02201045	Age & Sex	57 Years & F
Patient Name	MRS. GOMTI BAI - 170677	Study Date	20-Feb-2025
Referring Physician	DR. V. K. GUPTA	Reported Date	21-Feb-2025

CECT FACE+NECK

Plain and Post-contrast images of the Neck are taken.

Poorly-demarcated lesion noted in Oral cavity.

The lesion is predominantly Solid. It appears Hypodense (with respect to soft tissues) and shows Heterogeneous Post-contrast enhancement with few non-enhancing (cystic / necrotic) areas. No obvious evident internal fat density or calcification noted at present.

Likely epicentre of the lesion appears to be Left Anterolateral aspect of Oral Tongue (Anterior 2/3rd of Tongue).

Inferiorly, the lesion involves Floor of mouth on Left side.

Medially, the lesion involves the Intrinsic muscles of the tongue and partially encases Lingual neurovascular bundle.

No obvious evident extension of the lesion across the midline/lingual septum (Distance between the medial margin of the lesion and the midline/lingual septum is 3 mm).

No obvious evident involvement of genioglossus muscles.

No obvious evident involvement of base of tongue.

No obvious evident extension of the lesion up to the tip of the tongue.

Combined Size of the lesion is 35 x 18 x 31 mm (AP x TR x CC).

Max depth of involvement of tongue is 20 mm.

--- Findings likely represent Neoplastic aetiology.

Few subcentimeter sized lymph nodes noted in Bilateral level I, II.

Few of the lymph nodes show altered morphology (loss of fatty hilum), Heterogeneous enhancement & suspicious areas of necrosis.

--- suspicious for metastasis.

Minimal DNS noted to Right side. Hypertrophied Left Inferior turbinate.

Rest Visualised Oral Cavity {*Valsalva Maneuver not performed*}: Unremarkable.

Rest Visualised Deep Neck Spaces: Unremarkable.

Nasal Cavity & Paranasal Sinuses: Unremarkable.

Nasopharynx: Unremarkable.

Oropharynx: Unremarkable.

Hypopharynx: Unremarkable.

Larynx {*Phonation Maneuver not performed*}: Unremarkable.

Infra-Temporal Fossa: Unremarkable.

Skull Base: Unremarkable.

OPINION

- **Poorly-demarcated Predominantly Solid lesion noted in Oral cavity, primarily involving the Left Anterolateral aspect of Oral Tongue (Anterior 2/3rd of Tongue) with morphology, locoregional relations and extensions as described above.**

--- Findings likely represent Neoplastic aetiology.

- **Few subcentimeter sized lymph nodes noted in Bilateral level I, II. Few of the lymph nodes show altered morphology (loss of fatty hilum), Heterogeneous enhancement & suspicious areas of necrosis.**

--- suspicious for metastasis.

ADV: Clinical correlation, Further workup and Interval Follow up SOS.



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