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柯翠蓮(0012357270)醫學影像部CT檢查

CM-R002-1432206 報告狀態:完整報告 性別:女 生日:0390925
申請醫師:白禮源 血液腫瘤科 申請日期:1120904 1224 執行日期:1120908 1639
報告日期:1120914 1400 報告人員:林建宏(放診專醫字第000747 號)

【檢查(驗)項目】

170 Abdomen CT 有/無造影劑

【報告內容】

CT of the abdomen without and with contrast medium is performed from diaphragm to the pelvis cavity.

This study is compared with the previous abdominal CT. (2023-7-8)

Findings:

Status of thyroid cancer post op.
Status of pancreatic adenocarcinoma post biopsy proved.
A 2.8x2.5cm hypodense nodule in pancreatic body, pancreatic cancer is suspected, suggest clinical correlation.
Peripancreatic invasion is suspected.
Encasement of celiac trunk, splenic artery and splenic vein.
Two osteoblastic lesions over T12 and sacrum, metastases are suspected, mild deterioration as compared with last CT.
Multiple cysts in bilateral kidneys and liver, polycystic kidney disease and polycystic liver disease is suspected.
Fatty liver.
An uterine myoma.

No definite space-occupying lesion in the liver, gall bladder, spleen, adrenal glands, kidneys, and urinary bladder.
Unremarkable visible gastrointestinal tract and mesentery.
No significant enlarged paraaortic or parailiac lymph node.
No free intraperitoneal fluid or gas collection.

IMP:

1. Status of thyroid cancer post op.
Status of pancreatic adenocarcinoma post biopsy proved.
2. A 2.8x2.5cm pancreatic cancer in pancreatic body is suspected, suggest clinical correlation.
Peripancreatic invasion is suspected.
Encasement of celiac trunk, splenic artery and splenic vein.
3. Two metastases over T12 and sacrum are suspected, mild deterioration as compared with last CT.
4. Polycystic kidney disease and polycystic liver disease is suspected.
5. Fatty liver.

6. An uterine myoma.

林建宏(放診專字第0747號)

★★★ 此報告僅為參考，如有不適或疑義，敬請盡快就醫 ★★★
本報告內含個人資料，請妥善保管

柯翠蓮(0012357270)醫學影像部CT檢查

CM-R002-1432205

報告狀態:完整報告 性別:女 生日:0390925

申請醫師:白禮源 血液腫瘤科

申請日期:1120904 1224 執行日期:1120908 1640

報告日期:1120911 2016

報告人員:馮歆(放診專醫字第001405 號)

【檢查(驗)項目】

155 Chest CT 有/無造影劑

【報告內容】

CT scan of chest with/without IV contrast showed:

This study is compared to previous study on 2023-07-08 (Abdomen CT).

* Status of thyroid cancer post op.

* A case of pancreatic cancer, s/p chemotherapy by clinical information.

(1) Mild decreased size of hypodense nodule in pancreatic body.

Persisted peripancreatic invasion and encasement of splenic artery and splenic vein.

(2) An osteoblastic lesion over T12, metastasis is suspected. It showed mild increased in extent.

(3) Small LNs at paraortic and peripancreatic region without significant changes.

* Some small nodules (at most 5mm) are noted in both lungs, R/O granulomas, metastasis or other lung nodules.

Subpleural lines, small subpleural opacities and reticula are noted at posterior portions of both lungs.

Fibrosis and focal atelectasis are noted in both lungs.

Bronchial dilatation is noted in bilateral lower lobes of lungs with "signet ring" sign and peribronchial thickening.

* Minimal right pleural effusion with dependent lung atelectasis. It showed decreased in amount.

Calcifications are noted along bilateral apical pleura.

* Mural calcifications are noted at large arteries.

* Multiple cysts in bilateral kidneys and liver, polycystic kidney disease and polycystic liver disease is suspected.

* Fatty liver.

* Degenerative changes and mild scoliosis of spine.

A well-marginated osteosclerotic nodule is noted at T6 vertebra, in favor of bone island.

No significant LAP in the mediastinum.

No biliary tree dilatation.

Normal contour of spleen.

No hydronephrosis.

Impression:

* A case of pancreatic cancer, s/p chemotherapy by clinical information.

(1) Mild decreased size of hypodense nodule in pancreatic body.

Persisted peripancreatic invasion and encasement of splenic artery and splenic vein.

(2) An osteoblastic lesion over T12, metastasis is suspected. It showed mild increased in extent.

(3) Small LNs at paraaortic and peripancreatic region without significant changes.

* Some small nodules (at most 5mm) are noted in both lungs, R/O granulomas, metastasis or other lung nodules.

Nonspecific atelectasis, fibrosis, or inflammation, posterior portions of both lungs.

Fibrosis and focal atelectasis are noted in both lungs.

Bronchiectasis, both lower lungs.

* Minimal right pleural effusion with dependent lung atelectasis. It showed decreased in amount.

Calcifications at bilateral apical pleura.

* Atherosclerosis.

* Polycystic kidney disease and polycystic liver disease is suspected.

* Fatty liver.

Suggest clinical correlation and follow-up.

馮歆(放診專字第1405號)

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柯翠蓮(0012357270)醫學影像部CT檢查

CM-R002-1413828

申請醫師：周範雅 急診內科

報告日期：1120710 0926

報告狀態：完整報告 性別：女 生日：0390925

申請日期：1120708 1035 執行日期：1120708 1210

報告人員：林建宏(放診專醫字第000747 號)

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An uterine myoma.

Right pleural effusoin with dependent lung atelectasis.

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5. Fatty liver.

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7. Right pleural effusoin with dependent lung atelectasis.

林建宏(放診專字第0747號)

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