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CT ABDOMEN WITH CONTRAST TRIPHASIC FOR LIVER IMAGING

Collected on November 24, 2022 12:47 AM

If you have questions or concerns regarding your test results, contact the clinician who ordered the test. 

Results

Impression

IMPRESSION:

Ultrasound findings correspond to a 9.1 cm heterogeneous enhancing mass which appears originate from the gallbladder at level of the gallbladder fundus. Hepatic invasion of the mass along the right hepatic lobe interface cannot be excluded. Mass also appears to abut portions of the large bowel at level of the transverse colon. Mass involvement of the large bowel also cannot be excluded. Overall assessment of bowel limited due to lack of imaging through the pelvis.

Features most consistent with primary gallbladder malignancy.

Abnormal upper abdominal lymph nodes, concerning for lymph node metastases.

Narrative

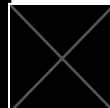
PROCEDURE: CT ABDOMEN WITH CONTRAST TRIPHASIC FOR LIVER IMAGING, 11/24/2022 12:27 AM

CLINICAL INDICATION: eval of liver mass.

TECHNIQUE: Transaxial images obtained through the abdomen before and following administration of intravenous contrast. Hepatic mass protocol. Coronal and sagittal reformats were generated.

IV Contrast: 100 cc Omnipaque 350

Total Exam Dose Length Product: 2076.81 mGy-cm



Total Exam CT Dose Index: 16.96, 20.62, 20.23, 17.10 mGy

COMPARISON: Ultrasound from 11/23/2022, CT from 5/12/2007

FINDINGS:

Liver: Large mass extends from the gallbladder, as mentioned below. Portions of the mass are inseparable from the right hepatic lobe, such as images 101 through 11 of series 601.

Gallbladder and biliary ducts: 8.8 x 6.9 x 9.1 cm heterogeneous mass appears to extend from the gallbladder at level of the bladder fundus, extending caudally within the abdomen. As mentioned above, the largest portion of mass broadly abuts the liver parenchyma recent. Hepatic invasion cannot be excluded. Mass also appears to contact portions of the liver at the hepatic flexure, incompletely assessed. No biliary dilatation.

Pancreas: Within normal limits.

Spleen: No splenomegaly or focal abnormalities.

Adrenal glands: No adrenal mass.

Kidneys: There is no evidence of renal stone or mass. There is no hydronephrosis.

Bowel: Large bowel level of the hepatic flexure partially contacts the suspected gallbladder mass. This is incompletely assessed on abdominal CT.

Aorta/vena cava: The IVC, abdominal aorta, and proximal mesenteric arteries are within normal limits.

Lymph nodes/mesentery: No enlarged portacaval lymph nodes measuring up to 1.2 cm short axis. Subcentimeter mesenteric lymph nodes measure up to 8 mm short axis.

Free fluid/free air: No ascites or free air.

Lung bases: Clear.

Abdominal wall: Normal for age.

Bones: No destructive changes. Normal for patient age.