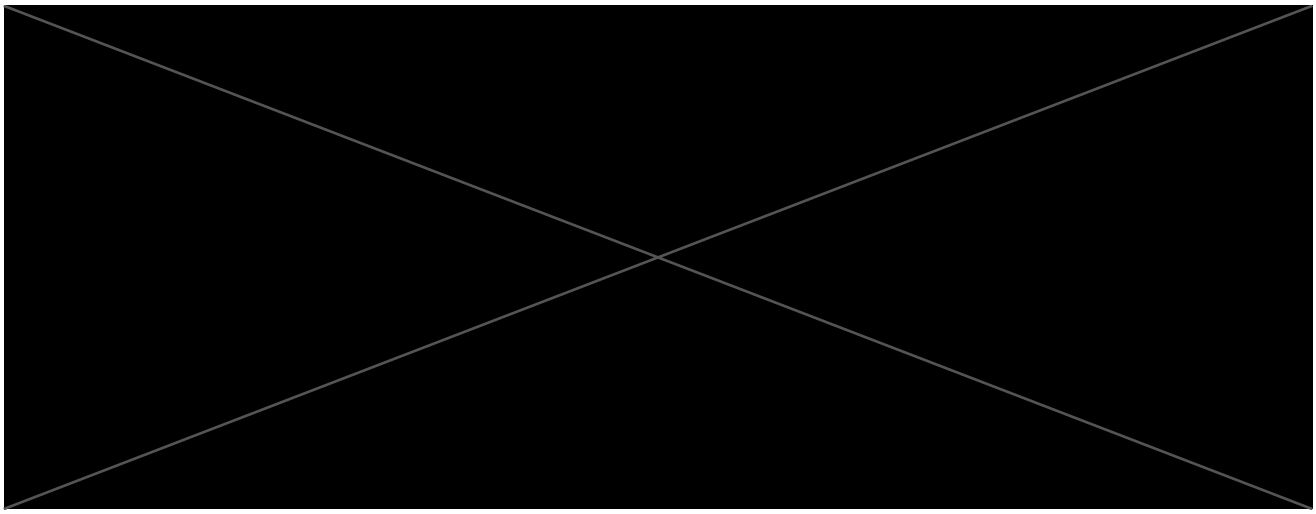

PET/CT Tumor Skull Mid-Thigh Initial

Patient:	**KUMAR, BALWINDER KAUR**	**DOB:**	

Radiology Report

EXAM: PET/CT Tumor Skull Mid-Thigh Initial
EXAM DATE: 9/13/2023 9:22 AM PDT
INDICATION: Gallbladder cancer, cholecystectomy, partial colonic and liver resection, chemotherapy, restaging for treatment strategy planning.

TECHNIQUE: PET-CT scan was performed from the vertex of the skull to the mid thighs following intravenous administration of F18-fluorodeoxyglucose. The CT scan data was used for anatomic localization and attenuation correction of the PET images. No oral or intravenous contrast was administered.

RADIOPHARMACEUTICAL: 11.6 mCi F-18 FDG
UPTAKE TIME: 64 minutes
FINGERSTICK GLUCOSE: 133 mg/dl

COMPARISON: 7/10/2023

FINDINGS:
Reference SUV:
Mediastinal blood pool: 2.3 (previously 2.6)
Liver: 3.2 (previously 3.8)

Head and neck: No suspicious focus of FDG uptake. There is diffuse thyroid uptake as before.

Thorax: Multiple groundglass opacities and spiculations persist within the right lung and are similar to the prior study. They are mostly nonavid but a few have mild uptake with maximum SUV as high as 3.4.

An avid right paratracheal node persists with maximum SUV currently 6.8 (previously 5.7). Milder uptake is present within the right hilum, maximum SUV 3.6.

Abdomen and pelvis: There is cholecystectomy, partial hepatectomy and right hemicolectomy. A right upper quadrant mass in the region of surgical clips at the gallbladder fossa remains difficult to properly visualize on CT. It now demonstrates activity similar to background.

There is normal urinary tract and bowel activity. There is no hydronephrosis.

Musculoskeletal / soft tissues: No suspicious focus of FDG uptake. Physiologic activity is present.

Low dose, nondiagnostic, incidental CT findings include port catheter extending to the low SVC, coronary calcifications, calcified mediastinal nodes.

IMPRESSION:
1. Postoperative changes in the right upper quadrant. Mass adjacent to the surgical clips remains difficult to visualize on CT, but this region is now negative on PET.
2. Avid nodes within the mediastinum and right hilum are grossly unchanged.
3. Right lung spiculations and groundglass change with stable CT appearance. A few of these sites demonstrate mild uptake on PET.
4. No new sites of disease.