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Check 5 on Selected Components for CT NECK WITH CONTRAST

TEST: CT NECK WITH CONTRAST
Date & Time: 04/21/08 10:42
REPORT STATUS: Final
FACILITY: Scottsdale Healthcare-Osborn

Result Name	Results	Units	Reference Range
READ BY	D CHRISTIA		
D CHRISTIAN SONNE-MD			
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D CHRISTIAN SONNE-MD, RADIOLOGIST			
CT NECK WITH CONTRAST			

COMPARISON
PET CT 06/25/07.

CLINICAL HISTORY
Right tongue squamous cell carcinoma.

TECHNIQUE
CT imaging obtained through the neck and face with contrast. Multiplanar reformations performed.

FINDINGS
Images 36 through 38 of the axial sequences. There is an ill defined hyperdense mass within the right anterior tongue that measures up to 3.8 cm in greatest dimension. The mass appears to extend from the right lateral margin of the tongue and to the left, mildly across the midline. The floor mouth region is somewhat obscured due to metallic artifact from dental hardware. However, on images 37-40 there is asymmetric soft tissue fullness more anterolaterally to the main body of the tongue and is noted at the level of the expected teeth which are absent. This is centered just to the right of the 3 or 4 residual anterior mandibular teeth. This region is of uncertain significance and could represent additional areas of tumor in the region of the gumline. No focal osseous destructive lesions are seen. Mandible is grossly intact. No significant mass effect upon the airway. Multiple subcentimeter cervical lymph nodes are seen bilaterally. Large nodes measure up to 5-6 mm. No nodes meet pathologic size criteria. However, correlation with PET imaging may be helpful for better characterization. The major vessels are grossly patent. The thyroid gland is homogeneous. The visualized brain, orbits, and paranasal sinuses are grossly unremarkable. Mastoids are well aerated. Mild degenerative changes are seen within the cervical spine. Lung apices are grossly unremarkable.

IMPRESSION

1. Ill defined soft tissue fullness noted in the anterior aspect of the right tongue which extends across the midline measuring up to 4 cm compatible with provided history of tumor. Additional soft tissue fullness anterolateral to the tongue at the level of the anterior mandibular and/or maxillary gum line could represent additional site of tumor. Follow-up with PET/CT and MRI may be

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Check 5 on Selected Components for MRI ORBIT/FACE/NECK W&W/O

TEST: MRI ORBIT/FACE/NECK W&W/O

→ Date & Time: 05/05/08 09:09

REPORT STATUS: Final

FACILITY: Scottsdale Healthcare-Osborn

Result Name	Results	Units	Reference Range
<input checked="" type="checkbox"/> MRI ORBIT/FACE/NECK W&W/O			

REPORT

Pre and post contrast imaging of the neck performed. I am provided with minimal related history. The axial images are somewhat compromised by extensive swallowing artifact and patient motion.

The parotid glands are somewhat small bilaterally. Submandibular glands are not visualized bilaterally. Correlate with the patient's known history. Has there been surgical resection? The tongue is slightly heterogeneous, but no discrete tongue mass is apparent on this study. Correlation with contrast enhanced CT may provide additional characterization, if warranted. Parapharyngeal spaces and retromolar trigone appear unremarkable. No definite adenopathy is noted in the neck. The thyroid gland is unremarkable. Visualized intracranial compartment is unremarkable. Visualized chest is also unremarkable.

IMPRESSION

- 1. Study is limited by extensive swallowing motion and artifact.
 2. No definite soft tissue mass on this limited study. No submucosal lesions or adenopathy are apparent. Correlate with the patient's known history and, if warranted, with CT.

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Released Date Time- 05/07/08 1525

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