



# VYDEHI INSTITUTE OF MEDICAL SCIENCES & RESEARCH CENTRE

Department of Nuclear Medicine and Molecular Imaging

## PET - CT REPORT

Name: Mr. Sultana Begum Barbhuiya	Age/Gender: 40Y/F
Hospital No: 8322463	Date: 23.04.2025

No size significant or abnormal FDG avid cervical lymph nodes noted.

### CHEST

A calcified granuloma is noted in right upper lung field.

**FDG avid 0.6 cm sized nodule is noted along the superior segment of lower lobe of left lung (max SUV - 4.32).**

There is no evidence of pleural effusion or thickening seen on either side.

The trachea and main bronchi appear normal.

The heart and mediastinal vascular structures are well opacified with intravenous contrast

There is no size significant or abnormal FDG avid hilar or mediastinal lymph nodes noted.

No size significant or abnormal FDG avid supraclavicular or axillary lymph nodes noted.

### ABDOMEN & PELVIS:

Liver, spleen, pancreas and bilateral kidneys appear unremarkable.

Gallbladder shows no evidence of intraluminal radio-opaque calculi or abnormal FDG uptake.

Post right hemicolectomy status.

**Increased FDG uptake is noted in enhancing wall thickening involving rectosigmoid junction (max thickness 0.6 cm, max length 3.5 cm, max SUV – 11.46).**

**FDG avid circumferential wall thickening involving proximal 1/3rds and mid 1/3rds of rectum (max thickness 1.2 cm, max length 7.0 cm, max SUV – 11.75).**

**Multiple FDG avid omental deposits along the left mesocolic space, infra and supracolic region, periportal space are noted (largest 3.3 cm, max SUV - 10.57).**

**FDG avid nodular peritoneal thickening is noted more pronounce along the perihepatic region (max thickness 0.9 cm, max SUV – 5.97).**

**FDG avid heterodense soft tissue lesions are noted in bilateral adenxa (right adrenal lesion measuring 3.6 x 3.6 cm, max SUV – 7.27; left adrenal lesion measuring 2.6 x 2.6 cm, max SUV – 8.07).**

Stomach and small bowel appear unremarkable.

The uterus appears unremarkable.

No size significant or abnormal FDG avid abdominal or pelvic lymph nodes noted.



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No evidence of free fluid in peritoneum.

### MUSCULOSKELETAL

No focal abnormal FDG uptake is seen in visualized bones.

Marrow uptake is within normal limits.

### IMPRESSION:

In a patient with carcinoma ascending colon, post right hemicolectomy, post chemotherapy, present PET-CT scan reveals,

- Post right hemicolectomy status.
- Hypermetabolic wall thickening involving rectosigmoid junction and proximal rectum as described - suggest colonoscopic correlation to rule out metachronous primary disease.
- Metastatic omental deposits as described.
- Metastatic peritoneal deposits as described.
- Hypermetabolic heterodense soft tissue lesions in bilateral adnexa - likely Krukenberg deposits.
- Low grade hypermetabolic pulmonary nodule involving lower lobe of left lung - metastatic in nature
- No other metabolically active lesion is noted elsewhere on the present PET- CT scan.

Dr. Anitha D

Assistant Professor and Incharge head



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