CT SCAN OF THE THORAX:

Clinical indication: Shortness of breath/severe

Comparison: 7/13/06

Axial CT scan of the chest was performed with intravenous contrast. Evaluation of the lung parenchyma demonstrates no evidence of lung mass. No infiltrate or pleural effusion is identified. The tracheobronchial tree is patent without evidence of endobronchial lesion or mass. Evaluation of the soft tissues demonstrates no evidence of mediastinal or hilar lymphadenopathy. There are no pleural or pericardial effusions. The osseous structures demonstrates no evidence of bony mass. Evaluation of the pulmonary and arterial vasculature demonstrates no evidence of abnormality of the thoracic aorta. No evidence of pulmonary artery abnormality. There is no significant change compared to the previous study.

Conclusion:

1. No evidence of lung infiltrate or pleural effusion/mass.
2. No evidence of lymphadenopathy within the chest.
3. Clinical correlation is recommended.
4. No significant change compared to previous study dated 7/13/06.

Procedure: CT of the abdomen and pelvis without and with IV contrast (74170/72194).

Clinical information: Abdominal pain (789.00).

Technique: 5 mm spiral axial CT images were acquired through the abdomen without contrast and through the abdomen and pelvis with contrast and imaged using soft tissue and bone algorithms.

Limitations: None.

Comparison: No comparison study available.

Findings:


Impressions:

1. Unremarkable examination.