

Referring Physician: RACHEL PAWLIK  
Study: CT LUNG SCREEN (#AGH\_RADS)  
Series: Basic Text SR (#1)  
Manufacturer: Acuo  
Completion Flag: COMPLETE  
Verification Flag: VERIFIED  
Verifying Observers: 2025-12-03 16:06:58 - ICLAL OCAK, AHN HWP Wexford  
Content Date/Time: 2025-12-03 16:06:58

## Radiology Report

(observed: 2025-12-03 16:06:58)

Concept Modifier: Language of Contents Items and Descendants = English (end, ISO639\_2)  
Observation Context: Person Observer Name = ICLAL OCAK  
Observation Context: Procedure Study Instance UID = 1.3.6.1.4.1.29565.1.4.3523922261.1978236.1764770164.192016  
Observation Context: Subject Name = GERALD HOGENMILLER

## Findings

### Finding:

CT LUNG SCREEN, December 03, 2025 9:20 AM INDICATIONS: CT LUNG SCREENSmoking history. Lung cancer screening. COMPARISON: CT lung screen 04/24/2021  
TECHNIQUE: Volumetric acquisition of the chest was performed without intravenous contrast using a low dose chest CT protocol. Axial, sagittal, and coronal reformatted images are reviewed. FINDINGS: Limited assessment of the extrapulmonary and soft tissue structures due to the low dose protocol and no intravenous contrast. Mediastinum: Assessment of the hilar structures is limited without intravenous contrast. No enlarged mediastinal or hilar lymph nodes. Heart and vascular structures: Coronary calcifications: Moderate (1/3rd - 2/3rds of the coronaries).. Normal heart size. No significant pericardial effusion. Normal caliber of the ascending thoracic aorta and main pulmonary artery. Pleura: Unremarkable Upper abdomen: 5.7 cm splenic cyst. A fluid attenuating 1 cm lesion in the left hepatic lobe is too small to characterize but statistically favored to represent a cyst. Lungs and airways: Layering debris noted in the distal trachea an bronchus intermedius. The central airways are otherwise clear. A 1.3 x 0.9 x 1.3 cm spiculated solid nodule with pleural tethering in the medial right lower lobe (series 4, image 95) is suspicious for neoplasm. Miscellaneous: None IMPRESSION: 1. 1.3 cm spiculated solid nodule in the right lower lobe is suspicious for neoplasm. Recommend PET-CT or short-term follow-up noncontrast chest CT at around 3 months or tissue sampling. 2. Moderate coronary artery calcifications. Consider atherosclerotic cardiovascular disease risk assessment. LungRads Category: 4X - Very Suspicious. Preliminary Recommendation : PET-CT and thoracic surgical consultation. This case will be presented at multispecialty thoracic oncology conference with final recommendations to follow. Significant Findings: Coronary arterial calcification - moderate or severe. The presence of any coronary calcium increases risk for future heart attacks. Further evaluation by a physician, including risk factor assessment and treatment is recommended to address modifiable risk factors including elevated cholesterol, blood pressure, blood sugar, smoking cessation, appropriate diet and physical activity. A written summary of the findings will be mailed or electronically forwarded to the patient. A copy of this report will be forwarded to the referring/primary care physician. -----  
The images and findings for this examination were reviewed and approved by staff radiologist.