Name: Gerald Hogenmiller | DOB: 9/13/1960 | MRN: 12470000 | PCP: Martin Gregorio, MD | Legal Name: Gerald Hogenmiller

CT LUNG SCREEN



Results

CT Lung Screen

Impression

IMPRESSION:

No CT evidence for lung cancer. Mild coronary artery calcifications LungRads Category: 1 - Negative.

Recommendation: Follow Up Low-Dose CT in 1 Year.

A written summary of the findings will be mailed to the patient. A copy of this report will be forwarded to the referring/primary care physician.

Narrative

LOW DOSE CHEST CT WITHOUT CONTRAST, April 24, 2021 1:35 PM

INDICATIONS:

Smoking history. Lung cancer screening. 1- Personal history of nicotine dependence

COMPARISON:

None.

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. Axial CT images at reconstructed at 2.0 mm intervals.

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 pathologically enlarged mediastinal lymph nodes..

Heart and vascular structures: Heart size is normal with mild coronary artery calcifications.

Pleura: Unremarkable.

Upper abdomen: Unremarkable.

Lungs and airways: Bronchial walls are thickened with probable emphysema. However, there is no pulmonary nodule suspicious for lung cancer. The central airways are patent with no endobronchial mass. A small amount of

mucus or secretions is present in the distal trachea.

Miscellaneous: None.

General Information

Result Status: Final result

Ordered By Dr. S Federoff Resulted On 4/26/2021 9:21 AM

Reading Physician: Jeffrey Mueller, MD

Study Result

Narrative & Impression

LOW DOSE CHEST CT WITHOUT CONTRAST, April 24, 2021 1:35 PM

INDICATIONS:

Smoking history. Lung cancer screening. 1- Personal history of nicotine dependence

COMPARISON:

None.

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. Axial CT images at reconstructed at 2.0 mm intervals.

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 pathologically enlarged mediastinal lymph nodes..

Heart and vascular structures: Heart size is normal with mild coronary artery calcifications.

Pleura: Unremarkable.

Upper abdomen: Unremarkable.

Lungs and airways: Bronchial walls are thickened with probable emphysema. However, there is no pulmonary nodule suspicious for lung cancer. The central airways are patent with no endobronchial mass. A small amount of mucus or secretions is present in the distal trachea.

Miscellaneous: None.

IMPRESSION IMPRESSION:

No CT evidence for lung cancer.

Mild coronary artery calcifications

LungRads Category: 1 - Negative.

Recommendation: Follow Up Low-Dose CT in 1 Year.

A written summary of the findings will be mailed to the patient. A copy of this report will be forwarded to the referring/primary care physician.

MyChart[®] licensed from Epic Systems Corporation© 1999 - 2025