

CT LUNG SCREEN

Results

Results

CT Lung Screen

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.

Narrative

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 and 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

General Information

Ordered By Physician Assistant- R Pawlik, PA

Resulted On 12/3/2025 4:06 PM

Result Status: Final result

Reading Physician: Iclal Ocak, MD; Douglas Sgroi, MD

Study Result

Narrative & Impression

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