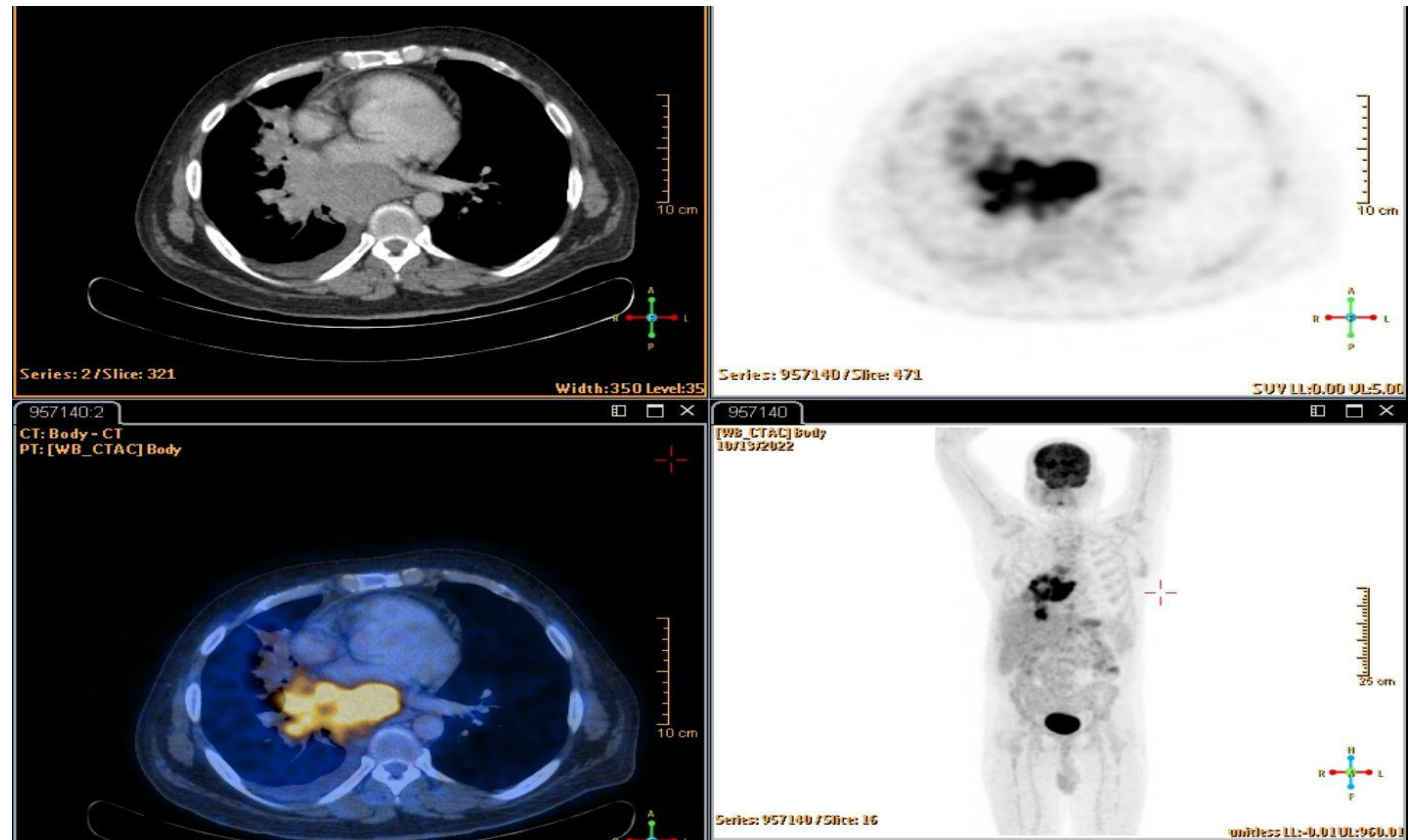


Oncology: Case 5 cont.

Prompt

Please generate a structural report according to these images.



GPT-4V

Imaging Findings:

Axial CT of the Chest (upper left image):

There appears to be a well-defined mass in the mediastinum, anterior to the heart.

Lung fields appear clear without obvious consolidation or mass.

No overt rib fractures or chest wall abnormalities noted.

PET Scan (upper right and lower right images):

Hypermetabolic activity is evident in the mediastinal region, correlating with the mass seen on the CT. This suggests that the mass is metabolically active.

Multiple foci of increased uptake in the axial skeleton, which could be indicative of metastatic bone lesions.

Additional hypermetabolic activity is evident in the abdominal region.

Fused CT/PET (lower left image):

The fused image confirms the location of the metabolically active mediastinal mass adjacent to the heart.

It highlights the areas of uptake seen in the PET, providing anatomical context.

Preliminary Interpretation:

The mediastinal mass with increased metabolic activity on the PET scan is suspicious and may represent a primary malignancy or lymphoma. Its exact nature would need histological confirmation.

Multiple areas of increased uptake in the bones suggest possible metastatic disease.

The exact nature and origin of the other hypermetabolic lesions, especially in the abdomen, would require further characterization with dedicated imaging.

Reference answer

Significant regression of the primary mass and outstanding regression of the mediastinal-bihilar lymphadenopathy.

Massive mediastinal lymphadenopathy involving many stations

The pancreatic mass has enlarged and shows only mild-to-moderate radiotracer uptake.