

Patient Name : Meena Jain
 Age / Sex : 66 Y / F
 Referred By : Dr. SAMIT PUROHIT
 Centre : PRASHANT VIHAR

Lab No : ROH25082002
 Registration On : 05-Aug-25 09:23
 Patient ID : UROH.0000158408

Approved On: 06-Aug-25 10:57

18F FDG PET/CT Whole Body

F18-FDG WHOLE BODY POSITRON EMISSION TOMOGRAPHY WITH CONTRAST CT SCAN

Whole body PET/CT scan was done following intravenous administration of 7.0 mCi of F^{18} - FDG. Imaging was performed on PET scanner with Multidetector Computerised Tomography (MDCT), scanning from eyes to mid-thigh. A separate sequence with breath hold was performed for lung and a separate series for brain examination. A semiquantitative analysis of FDG uptake was performed by calculating SUV corrected for dose administered and patient lean body mass (Weight: 44 kg, Height: 136 cm). The blood sugar at the time of tracer injection was 101 mg/dl.

Patient is a known case of Carcinoma cervix. Post CTRT (26/04/2024). Post 9 cycles of chemotherapy (last on 31/03/2025). Post 6 cycles of chemotherapy (last on 21/06/2025). On Inj. Bevacizumab (21/07/2025). Previous PET/CT scan dated 15/04/2025 (done elsewhere) is available for comparison. PET/CT scan is being done for disease status evaluation.

The overall bio distribution of FDG is within normal physiological limits.

Primary Site:

No FDG avid lesion is seen in cervix.

Metastatic Survey:

Brain: The supra and infra tentorial brain parenchyma appears unremarkable. There is no ICSOL seen. The ventricular system appears normal. The brain parenchyma demonstrates normal FDG uptake. MRI is a better modality to evaluate brain metastases.

Head and Neck: Bilateral paranasal sinuses appear clear. The nasopharynx including the fossae of Rosenmüller is normal. The oral mucosa and the tongue appear normal.

Both lobes of the thyroid gland appear normal in size and demonstrate physiological FDG uptake. Rest of head and neck structures appear unremarkable.

Thorax: The heart and mediastinal vascular structures appear normal. The trachea and both main bronchi appear normal.

Lungs: Bilateral lung fields appear normal. There is no pleural or pericardial effusion noted.

Few faintly FDG avid mediastinal lymph nodes are noted with preserved fatty hilus-like inflammatory.

Abdomen: The liver appears normal in size. The hepatic parenchyma demonstrates normal attenuation. The intra hepatic biliary radicals are not dilated. The portal vein is normal. No abnormal FDG accumulation is seen in the liver parenchyma.

Gall bladder is distended with physiological FDG uptake (USG is the modality of choice for cholelithiasis).

Bilateral adrenals appear mildly bulky with mild heterogeneous FDG uptake.

Spleen and Pancreas appear normal in bulk and demonstrate physiological FDG uptake.

Scan to Validate



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Bilateral kidneys appear normal in size. A left renal calculus is seen. Mild right hydronephrosis and left hydroureteronephrosis is noted. Right ureter is defined. Urinary bladder is normal in shape, size and distention.

The stomach is distended with water and shows physiological FDG uptake. The small and large bowel loops appear normal in caliber and fold pattern and shows physiological FDG uptake.

Diffusely increased FDG uptake is seen in anal canal - likely inflammatory.

There is no significant FDG avid lymphadenopathy seen.

~~Skeleton: Degenerative changes are seen in vertebrae. Rest of the bones under survey appear normal and show normal FDG uptake.~~

Opinion: In this known case of Carcinoma cervix, PET/CT scan findings reveal no FDG avid lesion in cervix or elsewhere in the regions of the body surveyed.

As compared to previous PET/CT dated 15/04/2025, previously seen lesion in right piriformis muscle has resolved. Rest of the scan findings are largely unchanged.

Please correlate clinically.

Dr. Taruna Goel
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DMC Reg. No.: R/9875

In case of any discrepancy due to typing error, kindly get it rectified immediately. This is professional opinion, not a diagnosis.



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