



MR LIVER W/WO CON

6/13/2018 MRI of abdomen

CLINICAL STATEMENT: Rectal cancer with pulmonary and hepatic metastases

TECHNIQUE: Axial in- and out-of-phase T1-weighted; axial fat-saturated T2-weighted; coronal single-shot fast spin-echo T2-weighted; and dynamic Gadolinium-enhanced axial T1-weighted images were acquired.

COMPARISON: CT 6/6/2018 and 3/8/2018.

CORRELATION: None.

FINDINGS:

HEPATOBILIARY: Three hepatic metastases are seen with a 2.1 x 1.9 cm segment 2, 0.9 x 0.8 cm segment 4A and 1.5 x 1.3 cm segment 5 lesions. These are better seen on this MR compared to recent CT scan but were present dating back to March 8, 2018. Multiple hepatic cysts. No biliary dilatation. Patent portaland hepatic veins

SPLEEN: Unremarkable

PANCREAS: Unchanged $3.4 \times 2.2 \text{ cm}$ fluid collection adjacent to the junction of the pancreatic body and tail and unchanged $2.8 \times 2.1 \text{ cm}$ fluid collection involving the posterior gastric wall probably representing pseudocysts. No intrinsic pancreatic mass or pancreatic ductal dilatation

ADRENAL GLANDS: Unremarkable

KIDNEYS: Unremarkable

 ${\tt ABDOMINAL}$

NODES: No abdominal lymphadenopathy

BONES/SOFT TISSUES: No focal suspicious abnormality

OTHER: Ileostomy.

IMPRESSION:

- 1. Several hepatic metastases, as above
- 2. Unchanged fluid collection adjacent to the pancreas and stomach consistent with the history of pseudocysts.

FINAL REPORT

Dictated By: ARTHUR A. FRUAUFF, MD Staff Radiologist: ARTHUR A. FRUAUFF, MD

I attest that the above IMPRESSION is based upon my personal examination of the entire imaging study and that I have reviewed and approved this report.

The following terms are used in MSKCC Radiology reports (except those of breast imaging studies) to convey the radiologist's level of certainty for a given interpretation.

Consistent with > 90%
Suspicious for/Probable/Probably approx 75%
Possible/Possibly approx 50%
Less likely approx 25%
Unlikely < 10%

Electronically Signed By: ARTHUR FRUAUFF , MD (Jun 13 2018 1:50:17:997PM)

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