MERCER MEDICAL IMAGING
NEW YORK

Patient: Mott, Elizabeth
DOB: 08/29/1960
Age/Sex: 57 / F

Attending Provider: John H Wilson MD

MRN: 34298347
Acct: 23409384

Exam Date/Time: 04/19/2018 10:30 EST
Procedure Type: PET/CT skull to thigh

PET/CT REPORT

EXAM DESCRIPTION:

PET/CT of the body APRIL 19, 2018

CLINICAL INFORMATION:
Reason: Breast carcinoma, staging

TECHNIQUE:
The patient was administered 12.93 mCi of fluorine 18 FDG IV via the right antecubital fossa and imaging from mid skull to mid thigh performed with concurrently acquired CT through this same area for attenuation correction and anatomical localization. Fasting blood glucose was 102 mg/dL. Scan start time was at 1045 hours.

COMPARISON:
No comparison

FINDINGS:

The large left axillary nodal mass which has recently been biopsied is seen. This measures about 4 cm in greatest diameter with maximum SUV at 15.2. There is an area in the left breast which is hypermetabolic with maximum SUV at 7.1. Unfortunately in addition there is evidence of widespread metastatic disease. There are multiple areas of hilar and mediastinal adenopathy with maximum SUV of 7.6 in a subcarinal nodal mass. There are multiple hepatic metastases suspicious for metastasis as well as multiple skeletal lesions. Largest area of involvement appears to be the T12 vertebral body with the majority of the T12 vertebral body showing a predominantly osteolytic process with maximum SUV at 8.1. Few small pulmonary nodules are seen below the resolution of PET but these are non-specific. Right renal cyst is noted with caval filter in place. Uterus has been removed.

IMPRESSION:
Left breast mass with associated axillary adenopathy and widespread metastatic disease as described.

D: Miranda Garcia, MD
S: eSigned by: Miranda Garcia M.D. on: 04/19/2018; 12:54