

**Patient Results**

All results performed dates from 23-Jul-2025

**Requested By:** Rumida Binti Abdul Rahman (Medical Record Officer)

29/09/2025 13:15

<b>03-Sep-2025 16:54</b>	<b>CT Brain, Chest and Abdomen</b>	<b>NCCT255021894942</b>	<b>Final</b>
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Report Link Final

Additional Info Verified Date/Time : 04/09/2025 12:09 Final  
 Verified Person : Dr. KWEK JIN WEI  
 Verified Section : NCC CT  
 Performed at : National Cancer Centre Singapore  
 30 Hospital Boulevard Singapore 168583

CT Brain, Chest and Abdomen Final

**HISTORY**  
 Metastatic lung cancer restaging

**REPORT**

Comparison was made with the prior private CT thorax abdomen and pelvis dated 16.05.2025 from MEH/Parkway Radiology as well as a private PET CT scan dated 28 May 2025 from AsiaMedic.

Intravenous contrast: Omnipaque 350 - Volume (ml) : 70

Brain	Normal
Ventricles	Normal
Midline shift	No
Extra-axial lesion	No
Axillary adenopathy	No
Mediastinal adenopathy	No
Hilar adenopathy	No
Pleural effusion	See below
Pericardial effusion	No
Lung	See below
Adrenals	Normal
Liver	See below
Spleen	Normal
Pancreas	Normal
Gallbladder	Normal
Kidneys	See below
Abdominal adenopathy	No
Ascites	No
Peritoneal nodules	No
Bowel	Normal
Destructive bony lesion	No

**FINDINGS:**

No intracranial metastasis detected.  
 Post left upper lobectomy with surgical clips in situ. No mass lesion noted at the surgical bed to suggest local recurrence.  
 Small associated left pleural effusion is likely postsurgical in nature.  
 Small mediastinal lymph nodes noted, measuring up to (0.6 cm) (series 9, image 42) in the left lower paratracheal region, not significant by strict size criteria. For attention on follow-up.

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No definitive evidence of distant metastases.

Bland thrombus noted within remnant stump of left upper lobe pulmonary vein (series 9, image 54) (series 700, image 36).

See below for incidental findings.

### OTHER FINDINGS:

Stable tiny (0.8 cm) (series 9, image 93) cyst in segment 2 of the liver which has an average CT number of (16 HU) (series 700, image 61). A few other tiny scattered hypodensities in the liver are too small to be characterised.

Fatty infiltration of the liver noted. No suspicious focal hepatic mass.

Stable (1.2 cm) (series 9, image 146) fat containing midpole hypodensities likely to represent a small angiomyolipoma, with average CT attenuation value of (-31 HU) (series 9, image 145)

Stable 3 mm nonspecific perifissural nodule in the right lower lobe (16 HU) (series 700, image 61) compared to prior PET-CT (series 4 image 179).

Stable breast nodule in the right lower inner quadrant with internal coarse calcification, likely benign, (1.1 cm) (series 9, image 72). This may be follow-up with a mammogram and ultrasound.

### CONCLUSION

Since 28 May 2025,

Interval left upper lobectomy with surgical clips in situ. No mass lesion noted at the surgical bed to suggest local recurrence.

Small associated left pleural effusion is likely postsurgical in nature

Small mediastinal lymph nodes noted, not significant by strict size criteria. For attention on follow-up.

No definitive evidence of distant metastases.

Bland thrombus noted within remnant stump of left upper lobe pulmonary vein.

Report Indicator: May need further action

This radiology report is a means of communication between the radiologist and your primary doctor. Please discuss the findings with your primary doctor.

Finalised by: KWEK JIN WEI, Senior Consultant, 07542F

Finalised Date/Time: 04/09/2025 12:09

(For your attention)

### End of Report

**This is a computer generated report and no signature is required.**