



Tuggerah
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Referred By:

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654 PACIFIC HIGHWAY
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Mr Peter Smith**DOB:** 07 January 1951**Patient ID:** JIF325Z**Visit Number:** 17068478**Service Date:** 05 March 2025 14:12**Visit Description:** CT ANGIOGRAM TAVI**CT TAVI ANGIOGRAM****HISTORY:**

Workup for TAVI for Aortic stenosis

COMPARISON:

None available.

TECHNIQUE:

Arterial phase imaging acquired through the chest, abdomen and pelvis.

FINDINGS:

	Diameter (mm)	
Ascending aorta	37 x 39	
Proximal aortic arch	36 x 39	
Distal aortic arch	28 x 28	
Aortic Isthmus	27 x 28	
Descending aorta	25 x 26	
Abdominal aorta	19 x 20	
Right common iliac	8 x 9	
Right external iliac	8 x 8	
Right femoral	6 x 6	
Left common iliac	9 x 9	
Left external iliac	7 x 8	
Left femoral	6 x 6	

Other Findings:

There is an irregular, spiculated lesion with a small central cavitation located laterally in the right upper lung lobe, measuring 16 x 8 mm in greatest axial diameter. Lung parenchyma is otherwise unremarkable.

Calcified pleural plaques in keeping with prior asbestos exposure. No obvious pleural effusions or pneumothorax.

Diffuse osteoarticular degenerative changes.

Colonic diverticulosis.

Numerous diverticuli in the urinary bladder, likely due to long-standing partial obstruction from an enlarged prostate.

No significant pathology noted elsewhere.

COMMENT:

Irregular, centrally cavitated lesion in the right upper lung lobe, suspicious for a primary neoplasm. Allowing for the limitations of this angiographic protocol, there is no obvious nodal or haematogenous spread.

Respiratory specialist review is advised.

Reported by: Dr Caio Nascif

CT Calcium scoring available at PRP Tuggerah