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CMO Reg. No. RMEE 2445133 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name : Ms. USHA DEVI

Age/Gender : 46 Y/F **Lab No** : 10132930

Referred By $\hspace{1cm}$: Dr.KGMU

Refer Lab/Hosp : CHARAK NA

Visit No : CHA250035634

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CECT STUDY OF FACE AND NECK

- A relatively well-defined differentially enhancing area measuring approx. 30 x 11 x 19 mm with associated contour irregularity is seen involving anterior two-thirds of tongue along right lateral border. It is not reaching upto tip of tongue. No extension is seen across midline. Suspicious extension is seen upto sublingual space.
- Right submandibular gland is not visualized. Subtle soft tissue thickening is seen in right submandibular region - post operative changes - post operative changes.
- The nasopharynx and oropharynx are seen normally.
- The aryepiglottic folds and epiglottis are seen normally.
- The valleculae and pyriform sinuses are seen normally.
- The laryngeal airway and cartilages are seen normally.
- Few subcentimeteric left cervical lymph nodes are seen.
- Thyroid gland is normal in size and density.
- Early degenerative changes are seen in visualized parts of spine.

IMPRESSION:

POST OPERATIVE CASE OF CARCINOMA RIGHT LATERAL BORDER OF TONGUE SHOWING

• DIFFERENTIALLY ENHANCING AREA OF CONTOUR DEPRESSION ALONG RIGHT LATERAL BORDER OF TONGUE AS DESCRIBED - ?POST OPERATIVE CHANGES / ??RESIDUAL LESION.

Note: CT is not the modality of choice for assessment on tongue lesions; MRI is recommended for the same.

Suggested: Follow-up

CHARAK

Clinical correlation is necessary.

[DR. JAYENDRA K. ARYA, MD]

Transcribed by: Kamran

*** End Of Report ***

