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

Patient Name : Ms. SAROJ Visit No : CHA250038498

 Age/Gender
 : 53 Y/F
 Registration ON
 : 03/Mar/2025 06:58PM

 Lab No
 : 10135793
 Sample Collected ON
 : 03/Mar/2025 06:58PM

Referred By : Dr.ESIC HOSPITAL LUCKNOW Sample Received ON

Refer Lab/Hosp : ESIC HOSPITAL LUCKNOW Report Generated ON : 04/Mar/2025 12:13PM

CECT STUDY OF FACE AND NECK

Volumetric acquisition of axial CT data was done before and after intra-venous acquisition of 60mL of non-ionic iodinated contrast agent.

- Few iso to hypoattenuating hypoenhancing nodular lesions are seen in both lobes and isthmus of thyroid gland, largest measuring approx. 11 x 9 x 13mm seen in right lobe. No obvious extra-glandular extension is seen. No obvious calcification is seen. Interface with adjacent structures is well maintained.
- Few subcentimeteric bilateral cervical lymphnodes are seen -- insignificant.
- The nasopharynx and oropharynx are seen normally.
- Bilateral submandibular and parotid glands 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.
- Degenerative changes are seen in visualized part of spine.

IMPRESSION:

• FEW ISO TO HYPOATTENUATING HYPOENHANCING NODULAR LESIONS IN BOTH LOBES AND ISTHMUS OF THYROID GLAND --? NATURE. Suggested: HRUSG correlation.

Clinical correlation is necessary.

[DR. JAYENDRA KR. ARYA, MD]

Transcribed by R R...

*** End Of Report ***

