

Patient Name	: Baby.MAHIMA	Visit No	: CHA250044654
Age/Gender	: 4 Y/F	Registration ON	: 12/Mar/2025 01:44PM
<b>Lab No</b>	<b>: 10141949</b>	Sample Collected ON	: 12/Mar/2025 01:44PM
Referred By	: Dr.KGMU	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 12/Mar/2025 03:45PM

**CT THORAX**

**CECT STUDY OF THORAX**

**CT study performed before and after injecting (intravenous) 30ml of non ionic contrast media.**

- Chest wall asymmetry is seen with focal bulge / protrusion of left anterior chest wall in parasternal region at level of 1<sup>st</sup> to 3<sup>rd</sup> intercostal spaces. Anterior end of left 4<sup>th</sup> rib is widened and bifid and anterior end of left 5<sup>th</sup> rib is widened. No evidence of any chest wall mass / space occupying lesion / collection is seen.
- Both lung fields are clear and show normal pulmonary architecture. No evidence of any parenchymal opacity, area of consolidation or any mass lesion is seen.
- No pleural effusion or pleural thickening is seen on either side.
- No mediastinal lymphadenopathy is seen.
- Trachea is central.
- Great vessels are seen normally.
- Heart size is normal.
- Esophagus is seen normally.
- Visualized liver shows normal parenchyma. No SOL is seen.

**OPINION:**

- CHEST WALL ASYMMETRY WITH FOCAL BULGE / PROTRUSION OF LEFT ANTERIOR CHEST WALL IN PARASTERNAL REGION WITH ANOMALOUS ANTERIOR ENDS OF LEFT 4<sup>TH</sup> & 5<sup>TH</sup> RIBS.
- NO OTHER SIGNIFICANT PULMONARY, PLEURAL OR MEDIASTINAL ABNORMALITY SEEN.

**Clinical correlation is necessary.**

**[DR. RAJESH KUMAR SHARMA, MD]**

Transcribed by Gausiya

\*\*\* End Of Report \*\*\*

