



Grossman Imaging Centers

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Patient: **ABRAMS, ROXANN L**

DOB: [REDACTED] Gender: [REDACTED] F

Exam Date: **Nov 08, 2023** 13:00

Location: [REDACTED]

Patient Tel: [REDACTED]

Ordering Physician: [REDACTED]

MRN: [REDACTED]

cc Physician:

PROCEDURE: **PET/CT- SKULL TO THIGH**

COMPARISON: **PET-CT 12/30/2022.** MRI pelvis without contrast 9/11/2023. MRI breasts with and without contrast 10/30/2023. Pelvic ultrasound 10/17/2023. CTA chest 4/10/2023.

TECHNIQUE: Following 15.9 mCi FDG IV right antecubital vein and an appropriate wait, PET and localizing CT images were obtained from the vertex of the skull to the mid thighs (with arms above the patient's head). Blood glucose: 109 mg/dL.

INDICATIONS: Bilateral breast cancer status post bilateral mastectomies in November 2022. Patient is on hormonal replacement. Left breast biopsies at the 7 and 430 o'clock positions earlier in the day. MRI breast 10/30/2023 showed numerous enhancing masses overlying the left breast implant. MRI pelvis 9/11/2023. **2.6 cm uterine mass, probable fibroid.** Restaging.

FINDINGS:

HEAD/NECK: Focal uptake with max SUV 5.5 fusing into the mid aspect of the left mandible. Some mild uptake is noted overlying the mandible within the soft tissues max SUV 3.8 compared to max SUV 4.6 on prior PET imaging. No destructive lesions are identified of the mandible.

CHEST: **Interval diffuse uptake overlying the left breast implant along its lower half with max SUV 2.4 since PET-CT 12/30/2022. Some nodularity and skin thickening is noted in this region.** Findings could be secondary to reactive changes following biopsies. Tumor not excluded.

Status post bilateral mastectomies and axillary node dissections. New left breast implant since prior PET-CT imaging with interval right breast implant/reconstructive surgery.

No suspicious pulmonary nodules

ABDOMEN/PELVIS: No hypermetabolic abnormality.

Status post cholecystectomy. Colonic diverticulosis without evidence for diverticulitis.

BONES: No hypermetabolic abnormality. No suspicious lytic or blastic lesions. Status post anterior and posterior fusion at L4-5.

ARMS: No hypermetabolic abnormality.

OTHER: None.

CONCLUSION:

1. New hypermetabolic activity overlying the left breast implant along its lower half. Associated nodularity within the soft tissues correspond to MRI breast 10/30/2023. Findings could be related to inflammation related to the biopsy is a secondary. Tumor not excluded.
2. Focal uptake fusing to the mid left mandible with mild uptake overlying the anterior aspect of the mandible within the soft tissues. The uptake within the soft tissues is similar to prior PET imaging. Findings could be related to inflammation or dental pathology. Recommend correlation clinically.
3. No other hypermetabolic abnormalities.
4. Attention to the uterus showed no focal abnormalities by PET-CT criteria. MRI and ultrasound have higher sensitivity for uterine masses.
5. CT findings include:
 - * Status post bilateral mastectomies and axillary node dissections.
 - * Interval replacement of left breast prosthesis and reconstructive surgery right breast with breast implant since prior PET-CT.
 - * Status post cholecystectomy.
 - * Colonic diverticulosis.
 - * Status post anterior and posterior fusion at L4-5.

Interpreted by: [REDACTED]

Electronically signed by: [REDACTED] on 11/09/2023 at 17:21

Thank you for the consultation.

ABRAMS, ROXANN L

Date of Birth: [REDACTED]

Identification#: [REDACTED]