Name	MR.S DASTAIAH		
Accession No	[redacted]	Patient ID	[redacted]
Referred By	BASAVATARAKAM INDCANCER HOSPITAL&RESERCH INSTITUTE	Age/Gender	052Y / Male
		Date	30-Mar-2026

CLINICAL REPORT

WHOLE BODY [18F]FDG PET CT SCAN

CLINICAL HISTORY:

- *Known case of CA tongue. Post-radiotherapy (27.6.25). Complaints of neck swelling. FNAC from right cervical lymph nodes suggestive of metastatic squamous cell carcinoma (25.3.26).*

- **PATHOLOGY DETAILS:** *FNAC from right cervical lymph nodes suggestive of metastatic squamous cell carcinoma (25.3.26).*
- **TREATMENT DETAILS:** *Post-radiotherapy (27.6.25).*
- **PREVIOUS IMAGING: NA**

PET-CT INDICATION:

- *Restaging.*

PET CT SUMMARY:

- *In this case of CA tongue, FDG PET-CT scan findings are suggestive of,*
  - *FDG avid discrete and conglomerated level I, right level IB and right level II cervical lymph nodes as described - metastatic disease.*
  - *Low-grade FDG avid ill-defined thickening in the left lateral border and tip of tongue as described ? significance. Suggested clinical correlation.*
  - *No definite PET e/o abnormal hypermetabolism elsewhere in the visualized body.*

COMMENTS:

- NIL

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PET CT – PROTOCOL

SCANNER :	Siemens Biograph Horizon with time of flight and LSO crystals
RADIO-ISOTOPE:	18F-FDG was injected intravenously
EXTENT OF STUDY :	Head to mid thigh
PROCEDURE	PET/CT Fusion imaging is done and 3D high resolution images obtained.
CT CONTRAST :	Diluted oral and IV contrast given
BLOOD GLUCOSE	165 mg / dl
Sr. CREATININE	0.9 mg/dl.
SUV max values are estimated base on body weight	

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CLINICAL REPORT

PET CT FUSION

OBSERVATION:

Physiological FDG uptake seen in brain, myocardium, liver, kidneys, urinary bladder and bowel loops.

PET CT BRAIN:

Brain parenchyma appears normal in attenuation.
No significant abnormality in both the cerebral hemispheres, cerebellum and brainstem.
No evidence of midline shift

PET CT NECK:

- ***Low-grade FDG avid ill-defined thickening (SUVmax 3.3) is noted involving the left lateral border and tip of the tongue.***
- ***No abnormal FDG uptake/ lesion is noted in rest of the tongue.***

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- ***FDG avid conglomerated lymph nodal mass is noted involving the level IA and right level IB cervical stations (measuring 4.8 x 2.5cm; SUVmax 8.2). The right submandibular gland is not separately visualised from the mass.***
- ***Low-grade FDG avid subcentimetric right level II cervical lymph node is also noted.***
- ***Mildly increased FDG uptake with no focal lesions noted in bilateral parotid glands (R>L) – likely inflammatory.***
- ***No abnormal FDG uptake or lesion is noted in rest of the bilateral cervical and supraclavicular regions.***

The oropharynx, hypopharynx and upper trachea appear normal.
Thyroid gland appears normal.

PET CT CHEST:

There is no nodal hypermetabolism in the chest.
There are no pulmonary nodules.
No obvious fibrosis, emphysematous changes or interstitial thickening seen.
No pleural or pericardial effusion.

PET CT FUSION

PET CT ABDOMEN AND PELVIS:

Liver is normal in size. The intrahepatic biliary radicles are normal. Portal and hepatic veins are normal.

Gall bladder - normal

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Pancreas is normal in size and density. No calcification, mass or pancreatic duct dilatation.
Spleen is normal in size and density.
Right kidney is normal in size. No obvious focal mass / hydroureteronephrosis.
Left kidney is normal in size. No obvious focal mass / hydroureteronephrosis.
Both adrenals appear normal in size and shape.
There is no mass or significant lymphadenopathy seen in the retroperitoneum.
No free fluid is seen in the peritoneal cavity.
Physiologic FDG excretion is seen in the kidneys and bladder.
Prostateappears normal.

MUSCULOSKETAL:

Normal FDG activity is seen in the spine. No blastic or lytic lesions are noted on CT.
No evidence of metabolically active lesion in the visualized bilateral lower extremities.

WHOLE BODY [18F]FDG PET CT SCAN

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PET CT IMPRESSION:

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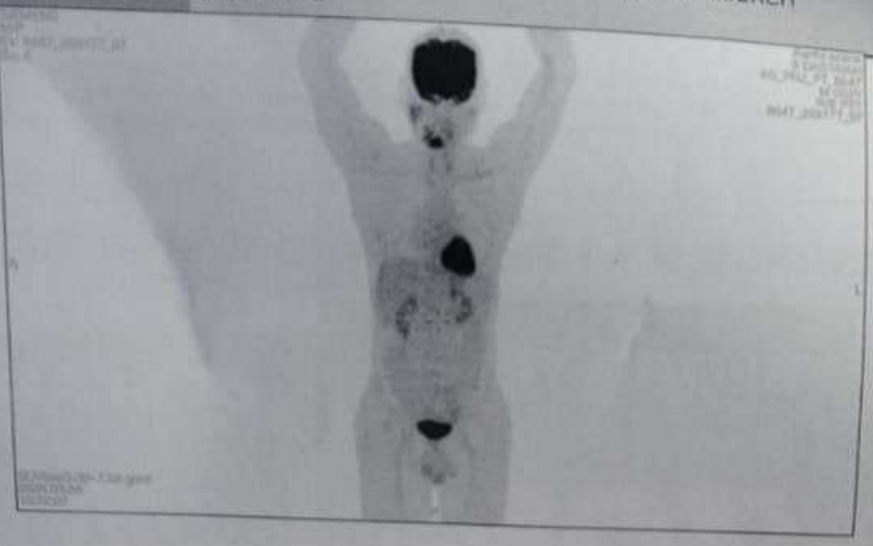
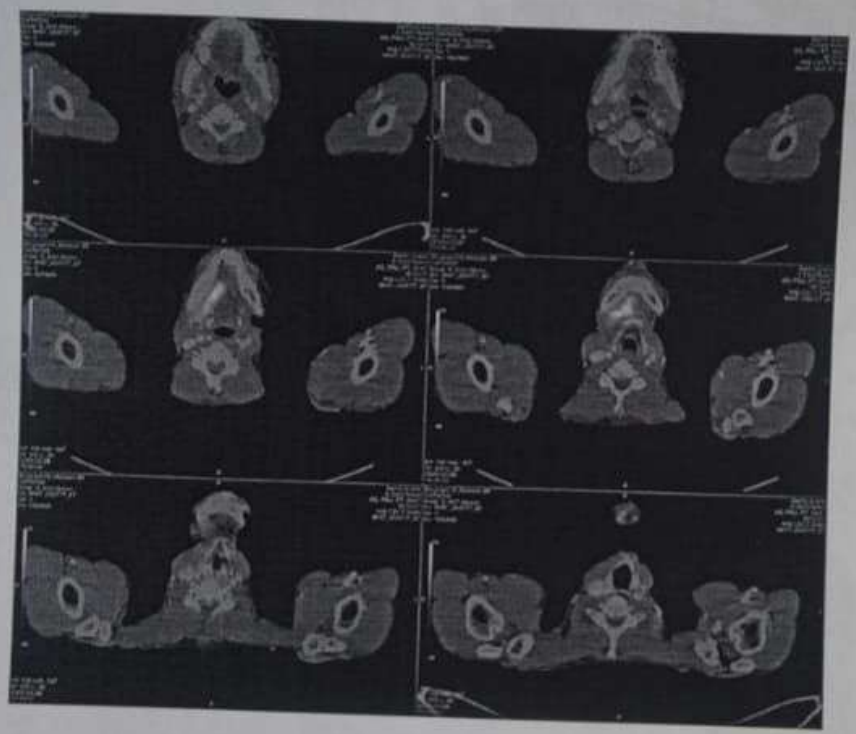
CLINICAL REPORT





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Dr Kamal MBBS MD NM
Nuclear Medicine Consultant
Reg no: 23854

CLINICAL REPORT

AARTHI SCANS & LABS

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LARGEST INTEGRATED DIAGNOSTIC CHAI

SIEMENS (GERMANY) MRI & CT SCANNERS

FULLY AUTOMATE ROBOTIC LAB

Name	: S DASTAIAH	SID No.	: 9
PID	: 9)	Reg Date & Time	: 28/03/2026 06:32:32
Age / Sex	: 52 Y / Male	Coll Date & Time	: 28/03/2026 07:13:49
Referrer	: BASAVATARAKAM INDCANCER HOSPITAL&RESERCH INSTITUTE	Report Date & Time	: 28/03/2026 09:00:23
Branch	: PUNJAGUTTA - HUB		

Partial Test Report

INVESTIGATION / METHOD	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
BIOCHEMISTRY.			
GLUCOSE FASTING (FBS) (Method : Glucose Oxidase - Peroxidase) (Specimen: FLUORIDE PLASMA)	93.3	mg/dL	Normal:74-100 Pre Diabetes:100-125 Diabetes :>=126 ADA guidelines
BIOCHEMISTRY			
CREATININE (Method : Creatinine amidohydrolase) (Specimen: SERUM)	0.9	mg/dL	0.5-1.3

End of the Report

DR.SYEDA FARHEEN OSMAN MBBS.,DCP
Pathologist

CLINICAL REPORT