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Clinical: Anterior mediastinal mass found in March 2025. Left pleural effusion. Left pleural disease. Multiple bilateral intrapulmonary nodules. Left-sided chest wall invasion. Poorly differentiated thymic carcinoma on biopsy. Rapidly progressive disease with progressive pleural and pericardial effusion in April 2025. Treated with intercostal drain and pericardial window. On VIP chemotherapy.

CT CHEST ABDOMEN AND PELVIS**TECHNICAL FACTORS**

Contrast-enhanced CT of the chest, abdomen and pelvis - portal venous phase. Arterial phase of the upper abdomen.

FINDINGS

Comparison with CT done 28th August 2025.

Chest

Large left anterior mediastinal mass is decreased in size measuring 5.1 x 6.3 mm (axial compared to 5.8 x 7.8 cm (axial) previously.

Maximal craniocaudal diameter of 4.7 cm compared to 6.1 cm previously.

Large left lower lobe superior segment paraspinal mass measures 2.1 x 3.2 cm compared to 3.3 x 4.8 cm previously (axial).

Lingular inferior segment nodule has decreased in size measuring 1.7 x 2.8 cm compared to 2.6 x 3.9 cm previously (axial).

Large right middle lobe medial segment nodule measures 18.8 mm compared to 23.9 mm previously with 21% decrease in size (RECIST 1.1).

Left upper lobe antral lateral subpleural nodule has decreased in size measuring 14.4 mm compared to 19.4 mm previously (25% decrease in size)(RECIST 1.1).

Multiple other lung nodules noted with decrease in size of all the lung nodules seen on the previous study.

No new lung nodules noted.

No pleural effusion no distinct pleural nodules seen.

Normal thyroid. Visible neck spaces are clear with no cervical lymphadenopathy.

Normal chest wall soft tissues with no axillary lymphadenopathy.

No cardiomegaly or pericardial effusion.

No mediastinal lymphadenopathy. Stable subcentimeter right inferior paratracheal lymph node.

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Normal esophagus and trachea.

Abdomen

No focal liver lesions. No biliary dilatation. Normal hepatic vessels.

No radiopaque gallstones or signs of cholecystitis.

Normal spleen, pancreas and adrenal glands with no focal mass lesions.

Normal kidneys with no focal mass lesions, hydronephrosis or perinephric collections.

Normal bladder with no focal masses.

Normal prostate and seminal vesicles. No pelvic masses.

Normal stomach and small bowel with no focal masses or bowel obstruction.

No focal colon mass lesions or wall thickening.

No abdominal lymphadenopathy.

No free fluid, pneumoperitoneum or collections.

Normal vessels.

Skeletal elements

No suspicious bone lesions.

COMMENT

Partial response to treatment with significant decrease in size of the primary mediastinal mass as well as the bilateral multiple lung nodules.

No new metastatic lesions noted.

REPORTED BY: Jonkers, Ferdinand

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Electronically Signed: 28-10-2025 11:23 AM