

Sample CT Dictations

Normal Head CT:

REASON FOR EXAM: OTHER, ENTER IN COMMENTS

ORIGINAL REPORT: CLINICAL INFORMATION: STROKE, LEFT LEG WEAKNESS.

EXAMINATION: CT OF THE HEAD WITHOUT CONTRAST AT 11:10 AM ON 06/23/2008

FINDINGS: THE STUDY IS NORMAL WITH NO EVIDENCE OF INFARCTION, HEMORRHAGE, POSITIVE MASS EFFECT OR OTHER ABNORMALITY.

IMPRESSION: NORMAL STUDY.

REASON FOR EXAM: HEADACHE

ORIGINAL REPORT: CLINICAL INFORMATION: WEAKNESS. STROKE.

EXAMINATION: CT OF THE HEAD WITHOUT CONTRAST, 1:39 AM; 06/23/2008

FINDINGS: THERE IS SUPRATENTORIAL ATROPHY PRESENT. THERE IS NO EVIDENCE OF RECENT INFARCTION, HEMORRHAGE, OR POSITIVE MASS EFFECT. CALCIFICATION IS PRESENT WITHIN INTRACRANIAL VESSELS.

IMPRESSION: ATROPHY.

Normal Chest CT:

REASON FOR EXAM: CHEST PAIN

ORIGINAL REPORT: CLINICAL INFORMATION: CHEST PAIN.

EXAMINATION: CT THORAX WITH CONTRAST

TECHNICAL: CT OF THE CHEST AFTER INJECTION OF IV CONTRAST. 100 ML OF OPTIRAY 320 WAS INJECTED INTRAVENOUSLY.

FINDINGS: THERE IS EXCELLENT DELINEATION OF THE PULMONARY ARTERIES, AS WELL AS THE THORACIC AORTA. THERE IS NO

EVIDENCE OF PULMONARY EMBOLUS OR OF AORTIC DISSECTION. THE LUNGS APPEAR CLEAR OF ACTIVE INFILTRATIVE PROCESSES. THE HEART AND MEDIASTINUM ARE WITHIN NORMAL LIMITS AND APPEARANCE.

IMPRESSION: NORMAL STUDY.

REASON FOR EXAM: OTHER, ENTER IN COMMENTS

ORIGINAL REPORT: CLINICAL INFORMATION: CHEST PAIN.

EXAMINATION: CT OF THE CHEST WITH IV CONTRAST

TECHNICAL: 100 ML OPTIRAY, PE PROTOCOL.

COMPARISON: COMPARED TO PRIOR CHEST X-RAY OF JUNE 21, 2008.

FINDINGS: THE LUNGS ARE CLEAR OF ACUTE PULMONARY INFILTRATES. NO PLEURAL EFFUSIONS OR PNEUMOTHORAX. SCATTERED FOCI OF PARASEPTAL EMPHYSEMATOUS CHANGES BILATERALLY. NO EVIDENCE OF FILLING DEFECT WITHIN THE PULMONARY ARTERIES TO SUGGEST PULMONARY EMBOLISM. THORACIC AORTA IS OF NORMAL SIZE AND CALIBER WITHOUT EVIDENCE OF ANEURYSM OR DISSECTION. HEART IS NORMAL. NO PERICARDIAL EFFUSION. VISUALIZED PORTIONS OF THE ABDOMEN ARE UNREMARKABLE.

IMPRESSION

1. NEGATIVE FOR PULMONARY EMBOLISM.
2. NORMAL EXAM.

Normal Abdomen/Pelvis CT:

REASON FOR EXAM: ABDOMINAL PAIN

EXAMINATION: CT ABDOMEN WITH IV CONTRAST, 06/17/2008, AT 0317 HOURS

EXAMINATION: CT PELVIS WITH IV CONTRAST, 06/17/2008, AT 0317 HOURS

TECHNIQUE: IMAGING OF THE ABDOMEN AND PELVIS PERFORMED DURING THE ADMINISTRATION OF 70 ML VISIPAQUE IV.

FINDINGS: LUNG BASES ARE CLEAR. THE LIVER, GALLBLADDER, SPLEEN, PANCREAS, ADRENAL GLANDS, AORTA, AND INFERIOR VENA CAVA ARE UNREMARKABLE. THE KIDNEYS APPEAR NORMAL AS WELL. NO PATHOLOGICALLY ENLARGED RETROPERITONEAL LYMPH NODES ARE SEEN. NO DILATED LOOPS OF SMALL BOWEL ARE IDENTIFIED. THE APPENDIX IS SEEN IN A RETROCECAL LOCATION AND APPEARS NORMAL IN CALIBER. NO PERIAPPENDICEAL INFLAMMATORY STRANDING IS SEEN. SMALL AMOUNT OF AIR DENSITY IS NOTED WITHIN THE APPENDIX.

IMAGING OF THE PELVIS DEMONSTRATES THE BLADDER, PROSTATE, SEMINAL VESSICLES AND RECTUM TO BE NORMAL. THERE IS NO FREE FLUID IN THE PELVIS

OPINION

1. THE APPENDIX IS UNREMARKABLE IN THIS PATIENT WITH ABDOMINAL PAIN. NO ETIOLOGY FOR ABDOMINAL PAIN IS IDENTIFIED.