HeartSavers™
Heart, Lung, Colon and Body Scans
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Patient: **Exam Date:**

MRN : **DOB:**

Referring Physician: **FAX:**

CT OF THE CHEST W/O CONTRAST

TECHNIQUE:
Electron beam tomography was performed with multiple axial images taken through the chest. No intravenous contrast was used. Comparison is made to 11/20/2014.

FINDINGS:
There is a 3 to 4 mm non-calcified pulmonary nodule at the lateral aspect of the left lower lobe, overall unchanged (image #54) and consistent with a benign process. There is a 6mm bullous in the left upper lobe (7mm previously). There are no pleural effusions or pneumothoraces.

Evaluation of the mediastinal windows shows no hilar or mediastinal lymphadenopathy. There is calcific atherosclerosis involving the aorta and coronary arteries, similar to the prior study. There is also mild calcification involving the mitral valve complex of uncertain clinical significance, but similar to the prior study. The minimal aortic valve calcification noted in 11/20/2014 is no longer seen. The trachea and central bronchi are unremarkable. No esophageal mass lesions are seen. There are minimal chronic-appearing anterior wedge compression fracture deformities scattered throughout the thoracic spine, likely related to osteopenia/osteoporosis, similar to the prior study.

IMPRESSION:
1. Calcific atherosclerosis, similar to the prior study.
2. Calcification involving the mitral valve complex, similar to the prior study.
3. Stable non-calcified solitary pulmonary nodule left lower lobe consistent with a benign process for which further evaluation is deemed unnecessary.
4. Several minimal chronic thoracic compression fracture deformities likely related to osteopenia/osteoporosis, similar to the prior study.

-Electronically Signed by: