



**ANAHEIM
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PATIENT NAME	D.O.B.	DATE	HOSPITAL NO.	RM #	PHYSICIAN
BERARDI, FREDRICK	11/12/50	08/22/98	507150	OUTP	LAURIDSEN, J I

C98-3856

CT STUDY OF THE LEFT GROIN AREA AND PROXIMAL THIGH WITH CONTRAST:

HISTORY: VASCULAR MASS NOTED ON ULTRASOUND ON THE LEFT SIDE

A total of 65 slices were obtained over the pelvis and extended to the upper thigh area. The patient was given 100 cc of Omnipaque 300. Calcifications are noted in the distal abdominal aorta. There is no evidence of aneurysmal dilatation at this site. The iliac arteries also have a normal appearance. There are calcifications in the pelvis consistent with phleboliths. The bowel has a normal appearance and no abnormalities are noted involving the bladder. The prostate gland is not enlarged. No other changes are noted within the pelvis.

Bony pelvis has a normal appearance. No abnormalities are noted involving the hip joints. The femoral arteries have a symmetrical appearance. On the left side, there is an area of decreased attenuation which has a circular appearance behind the left femoral vein. Similar density is noted on the otherwise but this appears to be of slightly less attenuation. This blends in with the vein below this area. There are a few small nodes noted in the inguinal areas with no other masses noted. The muscle bundles are symmetrical.

CONCLUSION:

1. ARTERIOSCLEROTIC VASCULAR DISEASE.
2. THE LEFT DEEP FEMORAL VEIN APPEARS LARGER THAN THE RIGHT AND IS OF DECREASED ATTENUATION SIGNAL. THE POSSIBILITY THAT THERE IS SOME THROMBUS IN THIS AREA WOULD HAVE TO BE CONSIDERED. CORRELATION AGAIN WITH THE ULTRASOUND EXAMINATION IS RECOMMENDED. NO OTHER SOFT TISSUE MASSES OR IRREGULARITIES ARE NOTED.

Dictated By:

Robert A. Cimini, M.D.
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DD: 22 AUG 98 - 11:59

DT: 22 AUG 98 - 13:40

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