



MRN/PIN: G-1-15960 / 2309-01-051258

Mrs. FatimaBegum Age/Gender: 59 yr(s) / F

CNIC/PP No:

Ref.By: Dr. SaimaShumile

Ref.No:



Report Date: 09-Sep-2023 1:02PM Visit Date:: 08-Sep-2023 3:50PM **Final Report**

CT PNS

C/o runny nose on & off for last 03 months associated with headache. X-ray PNS done CLINICAL INFO: showing sinusitis. CT scan advised for further evaluation.

TECHNIQUE: CT PNS performed according to departmental protocol.

REPORT:

Almost complete polypoidal soft tissue opacification of left maxillary sinus is seen extending through infundibulum into ipsilateral nasal cavity with associated widening of the osteomeatal complex. This soft tissue thickening is merging with the left superior and middle nasal turbinates. No significant obstruction of the nasal cavity is seen. No internal hyperdensities are seen to suggest fungal colonization. No calcification is seen.

Soft tissue thickening is also seen in left frontal and ethmoid sinuses.

Rest of the sinuses are well pneumatized.

Bilateral inferior nasal turbinates are hypertrophied.

Visualized bony skull is intact with no discrete fracture in current study. No evidence of deflected nasal septum is noted. Osteomeatal complex on right side is intact. Nasopharynx appears unremarkable. Visualized external, middle and inner ear structures including mastoid air cells are unremarkable.

Visualized brain parenchyma shows mildly prominent cerebral and cerebellar CSF spaces in keeping with age related atrophic changes.

There is irregular lobulated thickening of the inner table of bilateral fronto-parietal bones in keeping with hyperostosis frontalis interna.

CONCLUSION:

CT findings are suggestive of:

Almost complete polypoidal soft tissue opacification of left maxillary sinus extending into ipsilateral nasal cavity, merging with the left superior and middle nasal turbinates with associated widening of the osteomeatal complex. Findings are in keeping with left sinonasal polyposis.

Left frontal and ethmoid sinusitis.

Hypertrophied bilateral inferior nasal turbinates.

Please correlate clinically.

Note: Above mentioned impression is solely based on current imaging findings, final diagnosis should be made after the correlation with clinico lab and other imaging findings.

Note: This is digitally werified report and does not require manuals ignature.

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Dr. Maria Ashraf Radiologist MBBS,FCPS

For referringphysicianand or to furnish a secondopinion, hard copy imageshave been handed over to the patient. Radiologyimageinterpretation may vary from radiologiststo radiologistRepeat study with variableradiationdose, position, contrastor additionalviewing on other modality before and after clinical correlationmay be needed for any query or confusion, don't he sita teto contactour reporting doctor or diagnosticenter.