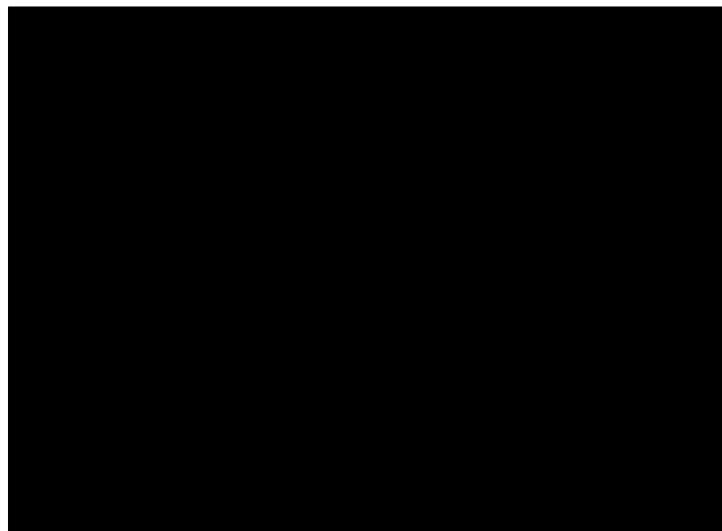


**Grey Bruce Health Services**  
Owen Sound, Markdale, Meaford,  
Southampton, Wiarton, Lion's Head

21 McGivern St.  
**Walkerton**, Ontario  
N0G 2V0



N/A  
N/A  
N/A  
N/A, N/A  
N/A



**D I A G N O S T I C I M A G I N G**

Exam	Accession #	Exam Date/Time	Ordering Physician
<b>Abdomen/Pelvis US Adult</b>	US-14-005868	3/6/14 9:42:12 AM	Khan, Akbar N

**Reason For Exam**  
MONITORING

**Read**  
Abdominal ultrasound:

The gallbladder has been removed. The common bile duct is not dilated.

The liver is heterogenous with also pole of metastatic deposits identified. There is some prominence of the intrahepatic ducts.

The pancreas is not adequately visualized.

The kidneys are normal with no evidence of obstruction. The spleen is not enlarged. The abdominal aorta demonstrates atherosclerotic change.

**IMPRESSION:**  
1. Atherosclerotic disease in aorta.  
2. Metastatic disease in the liver.

**Pelvic ultrasound:**

The uterus is identified in an anteverted midline position. The uterus is enlarged measuring 11.1 x 3.4 x 5 cm. There is calcification in the left side of the fundus probably a calcified fibroid. The endometrial midline echo measures 4.3 mm in diameter.

Right ovary is visualized and appears normal. The left ovary is not visualized with certainty. No free fluid is identified.



***D I A G N O S T I C   I M A G I N G***

Exam  
**Abdomen/Pelvis US Adult**

Accession #  
US-14-005868

Exam Date/Time  
3/6/14 9:42:12 AM

Ordering Physician  
Khan, Akbar N

**IMPRESSION:**

Bulky uterus with a calcified fibroid in the uterine fundus no other abnormalities identified.

Dictated By: Mowbray, Dr. Robert Dougl

Signed Date: 03/06/14 14:55:14

**Diagnostic Imaging  
Listowel Memorial Hospital**

255 Elizabeth Street East  
Listowel Ontario N4W 2P5  
Ph (519) 291-3125 ext 6227 \* Fax (519) 291-2813

Rad - LWHA LM Outpt - Dr Copy

## Consultation Report

Exam Date / Time	Exam Type	Order MD	Accession #
2014/04/23 09:32	US Abdomen	Khan, Akbar Nauman	US-14-0042233

The history states pancreatic carcinoma with liver mets

Monitoring response to neutral filled potentiated chemotherapy

Inflammatory response can cause initial tumor enlargement

Doppler is needed to assess blood flow in tumors to confirm live versus necrotic tissue

Previous cholecystectomy

Extrahepatic bile duct is not dilated measuring 4.4 mm in caliber

In the liver there are five lesions identified

These are all hypoechoic inhomogeneous with both well-defined and ill-defined margins

In the left lobe of the liver the largest mass is identified measuring 10.5 x 6.7 x 8.5 cm and demonstrates Doppler flow medially

. The right lobe of the liver there are four lesions

These measure 3.9 x 3.7 x 5.2 cm, 6 x 6.6 x 5.5 cm, 5.2 x 5.3 x 5.3 cm and 3.5 x 2.2 x 2.6 cm

Flow was not identified on Doppler in any of these four

Kidneys and spleen and aorta unremarkable

Impression

5. Hepatic metastases

Largest in the left lobe of the liver appears partially viable medially

Possible necrotic tissue laterally with no flow

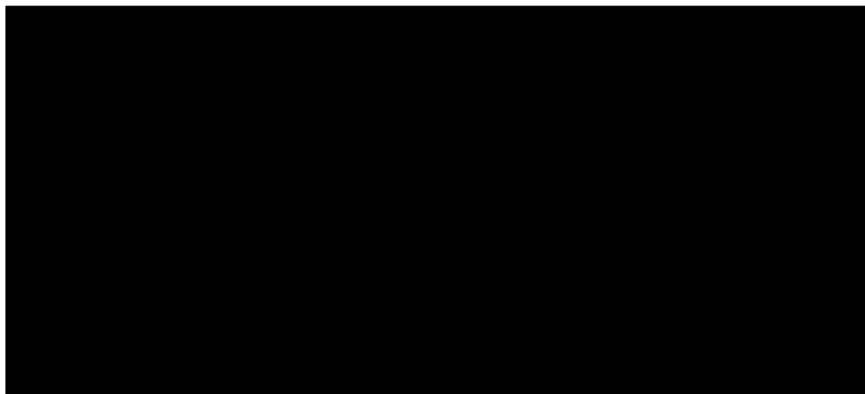
**REVIEWED**

*By akhan at 8:06 pm, 4/24/14*

**Diagnostic Imaging  
Listowel Memorial Hospital**

255 Elizabeth Street East  
Listowel Ontario N4W 2P5  
Ph (519) 291-3125 ext 6227 \* Fax (519) 291-2813

Rad - LWHA LM Outpt - Dr Copy



## Consultation Report

Exam Date / Time	Exam Type	Order MD	Accession #
2014/04/23 09:32	US Abdomen	Khan, Akbar Nauman	US-14-0042233

The four in the right lobe of the liver would appear necrotic and no flow identified

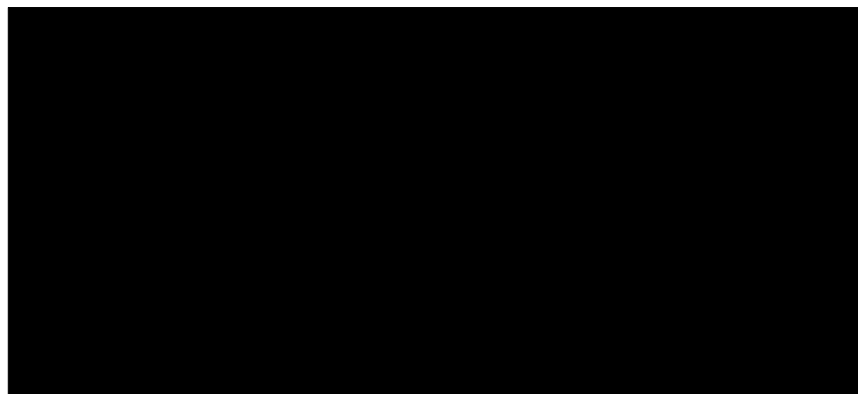
Continued follow-up recommended

Date Dictated: 2014/04/23 17:48  
Reporting Radiologist: Dr. Erenberg, Yale Abraham  
Electronically Signed By: Erenberg, Yale Abraham  
MD, FRCP(C)  
Date Signed: 2014/04/23 18:02  
tr: Voice, Recorded

**Diagnostic Imaging  
Listowel Memorial Hospital**

255 Elizabeth Street East  
Listowel Ontario N4W 2P5  
Ph (519) 291-3125 ext 6227 \* Fax (519) 291-2813

Rad - LWHA LM Outpt - Dr Copy



## Consultation Report

Exam Date / Time	Exam Type	Order MD	Accession #
2014/06/05 08:45	US Abdomen	Khan, Akbar Nauman	US-14-0059531



History states pancreatic carcinoma with liver mets

Previous Whipple

Monitoring response to neutral filled potentiated chemotherapy. Inflammatory response can cause tumor enlargement. Doppler these to assess blood flow in tumors to confirm live versus necrotic tissue

Last ultrasound shows four tumors necrotic one tumor half necrotic.

Previous cholecystectomy

Extrahepatic bile duct is not seen

There is air in the intrahepatic bile ducts due to the patient's Whipple

In the left lobe of the liver a large hypoechoic inhomogeneous lesion is again identified

It was not measured as the margins appear to be somewhat obscured ;there is some flow identified on Doppler although the flow does not appear increased since April 23, 2014

Possible new mass identified in the left lobe of the liver measuring 0.9 x 0.8 x 1 cm and there is flow identified here

We identify another ill-defined hypoechoic lesion in the right lobe of the liver

I do not think it has changed significantly in size since the previous April 2014

No flow on Doppler is identified

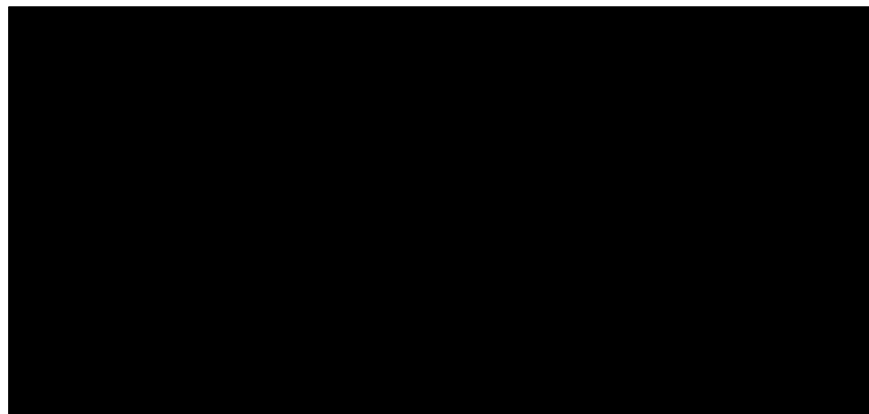
Lesion noted superiorly in the right lobe of the liver has increased in size compared to previous examination. This now appears to be completely cystic and it is likely necrotic  
~~There is a small amount of ascites~~

Kidneys unremarkable

**Diagnostic Imaging  
Listowel Memorial Hospital**

255 Elizabeth Street East  
Listowel Ontario N4W 2P5  
Ph (519) 291-3125 ext 6227 \* Fax (519) 291-2813

Rad - LWHA LM Outpt - Dr Copy



## Consultation Report

Exam Date / Time	Exam Type	Order MD	Accession #
2014/06/05 08:45	US Abdomen	Khan, Akbar Nauman	US-14-0059531

Spleen unremarkable

### Impression

Partially necrotic lesion left lobe of the liver not significantly changed in size

Possible new lesion left lobe of the liver approximately 1 cm with flow

Ill-defined hypoechoic lesion right lobe of liver inferiorly with no significant flow and unchanged in size

A completely cystic lesion now right lobe of the liver superiorly increased in size from previous and no flow likely necrotic

Apart from the small nodule that may be new in the left lobe the liver, there does not appear to be any progression of the patient's metastatic disease to the liver

Lesions remain necrotic or partially necrotic.. There is also a small amount of ascites

Date Dictated: 2014/06/05 21:49  
Reporting Radiologist: Dr. Erenberg, Yale Abraham  
Electronically Signed By: Erenberg, Yale Abraham  
MD, FRCP(C)  
Date Signed: 2014/06/05 22:10  
tr: Voice, Recorded