

SAN FRANCISCO GENERAL HOSPITAL
1001 POTRERO AVENUE
SAN FRANCISCO, CALIFORNIA 94110

MEDICAL RECORD COPY

DEPARTMENT OF RADIOLOGY

NAME KENNETT, TERESA
DATE DONE 06/01/85 READ 06/02/85
REFERRING DR [REDACTED]
REQUISITION # 37466
CONSULT DR.
RADIOLOGIST L [REDACTED]

B# 511304 DOB 02/04/49
TYPED 06/03/85 TIME 1723
TRANSCRIPTIONIST LR
LOCATION ERMW

CL. DATA: ABDOMINAL PAIN; LYMPHOMA.

KUB AND UPRIGHT. (NO COMPARISON FILMS)

THERE IS NO EVIDENCE OF FREE INTRAPERITONEAL AIR OR FLUID. AIR IS SEEN THROUGHOUT THE LARGE BOWEL, WITH CONTRAST IN THE RIGHT COLON WHICH LAYERS OUT IN AN AIR-FLUID LEVEL. NON-SPECIFIC AIR-FILLED SMALL BOWEL WITHOUT DEFINITE AIR-FLUID LEVELS IS NOTED. CONTRAST MATERIAL IS SEEN WITHIN THE GALLBLADDER WHICH PROBABLY REPRESENTS VICARIOUS EXCRETION OF I.V. CONTRAST. THIS RAISES THE SUSPICION OF RENAL INSUFFICIENCY. LYMPHANGIOGRAPHIC CONTRAST MATERIAL IS SEEN IN MARKEDLY ENLARGED PERIAORTIC LYMPH NODES.

IMPRESSION: 1. AIR-FLUID LEVELS, WITH MINIMALLY DILATED COLON.
2. CONTRAST SEEN IN GALLBLADDER, PROBABLY SECONDARY TO VICARIOUS EXCRETION OF I.V. CONTRAST MATERIAL. THIS RAISES THE SUGGESTION OF RENAL INSUFFICIENCY. CLINICAL CORRELATION RECOMMENDED. 3. ENLARGED PERIAORTIC LYMPH NODES.

SIGNED BY DR. [REDACTED]