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CAMPBELLTOWN
300 Queen Street,
Campbelltown, 2560

To: Dr J Ahmed 2 October 2015
Campbelltown Medical & Dental Centre
PO Box 7001
BLACKTOWN 2148

Dear Jovad

Re: Mr David WARD DOB: 04.11.1977
12 Rizal Street CAMPBELLTOWN NSW 2560

BONE SCAN (LOCALISED WITH SPECT/CT) - 02 October 2015

Thank you for referring David WARD for a bone scan.

Clinical History: Pain in the left lower posterior ribs following a direct injury 1 week ago.
Fracture of the left 9th / 10th ribs?

Report: Dynamic and blood pool images of the thoracic spine and chest were acquired as well as multiple delayed images, including tomographic imaging. In addition, a low dose co-registered CT scan was acquired for localisation.

There was no significant abnormal focal hyperaemia demonstrated in the early images. In the delayed images, mild focal uptake was noted in the posterior aspect of the left 11th rib as well as a small mild to moderate focus in the posterior aspect of the left 10th (adjacent to the costovertebral junction) most in keeping with recent fractures. Mild focal uptake was also in the left T9 costotransverse joint most in keeping with traumatic injury / arthritis as well as mild focal uptake in the anterolateral aspect of the right humeral head most in keeping with a rotator cuff enthesopathy. No other significant focal abnormality was demonstrated in the thoracic spine or chest.

Conclusion:

In the clinical setting, the scan appearances are most in keeping with a recent small fracture in the posterior aspect of the left 10th rib and low grade fracture of the left 11th rib as described as well as mild traumatic arthritis of the left T9 costotransverse joint.

Mild right rotator cuff enthesopathy. No other fracture or significant focal bony abnormality was demonstrated, particularly in the left ribs or thoracic spine.

Yours sincerely,


QUYEN NGUYEN
FRACP

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nuclear medicine and bone densitometry

