

WaveImaging

Santa Ana

Wave Imaging - Santa Ana

1100-A N. Tustin Ave
Santa Ana, CA 92705

Phone: (714) 835-6055

Fax: (714) 285-9084

ALSBAIHI, YOUSEF

MRN: 44140103

DOB: 08-23-1990 Sex: M

Phone: (650) 455-6514

Date of Service: 03-26-2026

Ordered By

NICOLAS REYES, MD

6460 E PACIFIC COAST HWY, STE D210
LONG BEACH, 90803

FAX: (415) 252-7176

EXAM: CT ABDOMEN AND PELVIS WITH CONTRAST

HISTORY: Right lower quadrant pain

TECHNIQUE: CT was performed from lung base to the symphysis pubis following intravenous and oral administration of contrast material. Delayed views were also obtained. Sagittal and coronal views were obtained. Post-processed reformations were also submitted for review. Study was performed on the multislice CT scanner.

The images were obtained following the administration of IV contrast.

Contrast: 90 cc Omnipaque 350 IV contrast.

The total DLP was 1966 mGy-cm and the CTDI was 34 mGy.

One or more of the following dose reduction techniques were used: automated exposure control, adjustment of the mA and/or kV according to patient size, use of iterative reconstruction technique. A total of 0 CT (Computed Tomography) examinations and 0 myocardial perfusion studies have been performed on this patient over the past 12 months. Counts as indicated include examinations performed within our network.

COMPARISON: None available.

FINDINGS:**ABDOMEN AND PELVIS:**

Lung Bases: Lung bases are clear. Mild bibasilar atelectasis noted. No sizable pleural effusions. Heart size is normal.

Liver: Normal contrast enhancement without discrete lesions. Normal hepatic vascular enhancement.

Gallbladder and Biliary Tree: Gallbladder is unremarkable. No biliary ductal dilatation.

Spleen: Unremarkable.

Pancreas: Unremarkable.

Adrenals: Unremarkable.

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Kidneys: Kidneys demonstrate normal contour. No evidence of hydronephrosis. No renal calculi. Normal contrast enhancement without discrete lesions.

Stomach/Gastrointestinal Tract: Stomach is unremarkable. Small bowel and colon demonstrate normal caliber without evidence for high-grade bowel obstruction. Normal appendix noted in the right lower quadrant. Scattered left colonic diverticulosis noted.

Ascites: None

Vasculature: No abdominal aortic aneurysmal dilatation identified. Normal abdominal aortic and IVC contrast opacification.

Lymphadenopathy: No abdominopelvic lymphadenopathy by size criteria. Scattered subcentimeter mesenteric and retroperitoneal lymph nodes are likely reactive.

Abdominal Wall/Mesentery: Small fat-containing umbilical hernia

Bladder: Unremarkable.

Pelvic Organs: Unremarkable

Osseous Structures: No suspicious or aggressive osseous lesions.

IMPRESSION:

1. No acute process.

HCC/RAF:

IF YOU ARE A PROVIDER AND WOULD LIKE TO CONTACT THE RADIOLOGIST PLEASE CALL (562) 459-3614. IF YOU ARE THE PATIENT AND HAVE QUESTIONS REGARDING YOUR RESULTS PLEASE CONTACT YOUR PROVIDER DIRECTLY.

End of diagnostic report for accession: 58216296

Dictated: 03-26-2026 1:55:32 PM

Electronically Signed By: Tung, Paul, MD 03-26-2026 1:55:32 PM

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