

**4 9 2025**

Impression

1. PI-RADS 5 lesion in the left peripheral zone with extraprostatic extension

Overall PI-RADS Category: 5. PI-RADS v2.1

Electronically signed by: Amy Killeen, MD on 4/11/2025 1:14 PM.

Narrative

EXAMINATION: MRI of the Pelvis with and without Contrast with Computer-Aided Diagnosis

EXAM DATE: 4/9/2025 8:40 PM

TECHNIQUE: High-resolution multiplanar MRI of the prostate performed with a 3T scanner before and after administration of IV contrast . Pulse sequences and acquisition parameters are PI-RADS v2.1 compliant and include high b-value small FOV high resolution DWI and dynamic perfusion images. A full field-of-view T2 sequence of the entire pelvis also obtained. Images were reviewed on the DynaCAD computer-aided diagnosis system for color maps, lesion localization and characterization, and lesion targeting

CONTRAST: The amount and type of contrast are recorded in the medical record.

INDICATION: elevated PSAs The patient has no reported history of a prior prostate biopsy. Evaluate for suspicious lesions, extracapsular extent, and adenopathy.

COMPARISON: Prostate MRI 6/8/2021

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FINDINGS:

Prostate size: 5.3 x 3.8 x 5.7 cm. The calculated gland volume is 60 ml

Most recent PSA: 12.4 ng/ml PSA Density: 0.2 ng/ml<sup>2</sup>

Hemorrhage: None

Exam Quality: Adequate for interpretation

Peripheral Zone: Peripheral zone lesion(s) are listed below.

Transition Zone: Heterogeneous with a few hyperplastic nodules. No suspicious lesion is identified within the transition zone.

Prostate lesion(s) ranked in order of suspicion of prostate cancer: Lesion #1 \*

Location: Left peripheral zone from base to mid gland (6:17)

\* Size: 27 x 15 mm

\* T2 signal features: PZ5: Same as for PZ4 but greater than or equal to 1.5 cm in greatest dimension or definite extraprostatic extension/invasive behavior T2 sequence category 5/5

\* Diffusion-weighted images (DWI): PZ5/TZ5: Same as PZ4/TZ4 but greater than or equal to 1.5 cm in greatest dimension or definite extraprostatic extension/invasive behavior DWI sequence category: 5/5

\* Dynamic Contrast Enhancement (DCE): DCE (+): Focal, and; earlier than or contemporaneously with enhancement of adjacent normal prostatic tissues, and; corresponds to a suspicious finding on T2W or DWI images. DCE sequence category: Positive

\* Prostate margin: Evidence for extraprostatic extension (6:18 and 17) Lesion overall PI-RADS category: 5/5

Neurovascular bundles: No evidence for involvement.

Seminal vesicles: No definite involvement

Lymph nodes: No lymphadenopathy

Urinary bladder: Diffusely thick-walled, likely accentuated by some mild underdistention.

Pelvic bones: Normal marrow signal

Additional pelvic findings: There are numerous diverticuli along the sigmoid segment of the colon with no associated inflammation. There is a small fat-containing umbilical hernia.

## 6-17-2021

Impression: Prostatomegaly with likely sequelae of prostatitis, correlation for acute symptoms would be beneficial. No discrete suspicious nodule to target for biopsy or dedicated follow-up.

Overall PI-RADS Category: 2 PI-RADS v2.1

Assessment Categories PIRADS 1 -- Very low (clinically significant cancer is highly unlikely to be present)

PIRADS 2 -- Low (clinically significant cancer is unlikely to be present) PIRADS 3 -- Intermediate (the

presence of clinically significant cancer is equivocal) PIRADS 4 -- High (clinically significant cancer is likely to be present) PIRADS 5 -- Very high (clinically significant cancer is highly likely to be present)

Dictated by: Andrew Moriarity MD on 6/16/2021 2:13 PM. Electronically signed by: Andrew Moriarity MD on 6/16/2021 2:18 PM.

Narrative

EXAMINATION: MRI of the Pelvis with and without Contrast with Computer-Aided Diagnosis

EXAM DATE: 6/8/2021 9:27 PM

TECHNIQUE: High-resolution multiplanar MRI of the prostate performed with a 3T scanner before and after administration of IV contrast . Pulse sequences and acquisition parameters are PI-RADS v2.1 compliant and include high b-value small FOV high resolution DWI and dynamic perfusion images. A full field-of-view T2 sequence of the entire pelvis also obtained. Images were reviewed on the DynaCAD computer-aided diagnosis system for color maps, lesion localization and characterization, and lesion targeting

CONTRAST: The amount and type of contrast are recorded in the medical record.

INDICATION: Elevated PSA. The patient has no reported history of a prior prostate biopsy. Evaluate for suspicious lesions, extracapsular extent, and adenopathy.

COMPARISON: None \_\_\_\_\_

FINDINGS:

Prostate size: 5.3 x 4.4 x 5.2 cm. The calculated gland volume is 63 ml

Most recent PSA: 7.07 ng/ml PSA Density: 0.11 ng/ml<sup>2</sup>

Hemorrhage: None

Exam Quality: Moderate rectal gas artifact which indents and deforms the posterior gland.

Peripheral Zone: There is heterogeneous T2 hypointense signal which is more bandlike in the right half of the gland and more confluent throughout the left base and mid gland in the posterior and lateral aspects. This is most commonly sequelae of prostatitis although the amount of confluent signal change could obscure underlying nodules. Within this limitation there is no discrete suspicious nodule.

Transition Zone: Nodular hypertrophy with heterogeneous perfusion and diffusion. No discrete suspicious nodules.

Neurovascular bundles: No evidence for involvement.

Seminal vesicles: Normal morphology with bilateral symmetry and normal signal features.

Lymph nodes: No pathologically enlarged lymph nodes.

Urinary bladder: No focal suspicious wall thickening.

Pelvic bones: Degenerative changes in the lower lumbar spine. No aggressive osseous lesions.

Additional pelvic findings: Tiny fat-containing umbilical hernia. Moderate sigmoid diverticulosis.