Memorial Sloan Kettering Cancer Center

PATIENT & CAREGIVER EDUCATION

Frequently Asked Questions About Viewing Your Radiology Test Results

This information answers some common questions about viewing radiology test results.

Radiology test results are also called imaging results. They're the results of an imaging scan (also called an imaging test or radiology scan), such as a PET scan, MRI scan, or CT scan. The written explanation of the test results is called a radiology report.

When can I see my radiology results?

Radiology results are available in MSK MyChart (MSK's patient portal) as soon as they're in our computer system. This means you may see them before your healthcare provider reviews them or discusses them with you.

Where can I find my radiology results?

You can find the report about your results in MSK MyChart. If you do not have an MSK MyChart account, you can visit

mskmychart.mskcc.org to sign up. You can also ask a member of your care team to send you an invitation.

You can get to MSK MyChart using the MSK MyChart mobile app or by going to mskmychart.mskcc.org in a web browser. Then, follow these steps.

1. Sign in to your account.
2. Select "Test Results"' near the top of the page.
3. Select the test result you want to open.

If you have trouble finding your radiology report, you can call the MSK MyChart Help Desk at 646-227-2593 or 800-248-0593 (toll-free). They are available Monday through Friday between 9 a.m. and 5 p.m. (Eastern time).

How do I print or save my radiology report?

You can print or save your radiology report using MSK MyChart.

- If you're using a web browser:
  1. Go to mskmychart.mskcc.org and sign in.
  2. Select "Test Results" near the top of the page.
  3. Select the test result you want to save or print.
  4. Select the Print icon. Follow the usual steps to save or print from your device.

- If you're using the MSK MyChart app on a smartphone or tablet:
  1. Open the MSK MyChart app and log in.
  2. Tap "Test Results" near the top of the screen.
  3. Tap the test result you want to save or print.
  4. Tap the 3 vertical dots in the top right corner of your screen.
  5. Tap "Print." Follow the usual steps to save or print from your device.

If you choose not to sign up for MSK MyChart, you can get a copy of your radiology report by contacting our Release of Information department. You can email them at HIMROI@mskcc.org or call them at 212-639-7302.

How do I send my radiology images to a healthcare provider outside MSK?

The healthcare provider can ask for the images by filling out our Radiology Image Request form. They can find it at www.msk.org/radiology-image-request

You can also use MSK MyChart to ask us to send your radiology images to a healthcare provider outside MSK.

1. Sign in to your MSK MyChart account.
   - If you're using a web browser, visit

mskmychart.mskcc.org and sign in.

- If you're using the MSK MyChart app, open the app and log in.

2. Open the Menu.
   - If you're using a web browser, select the "Menu" button in the top left corner of the page.
   - If you're using the MSK MyChart app, tap the "Menu" icon (the 3 vertical bars) in the top left corner of the screen.
3. Scroll down to the "Sharing" section and select "Sharing Hub." You can also type "sharing hub" into the search bar at the top of the menu.
4. Select "Yourself," even though you will be sending the images to a healthcare provider. You will choose who will get the images later.
5. Select "Request a formal copy."
6. Select "Someone else."
7. Answer the questions and select the checkbox next to Radiology Imaging. Specify the number of copies and who they are for. Include the full name and address for who we need to send them to.

If you choose not to sign up for MSK MyChart, you can ask us to send your radiology images to a healthcare provider

outside MSK by contacting our Release of Information department. You can email them at HIMROI@mskcc.org or call them at 212-639-7302.

How do I get a personal copy of my radiology images?

You can use MSK MyChart to ask for a personal copy of your radiology images.

1. Sign in to your MSK MyChart account.
    - If you're using a web browser, visit mskmychart.mskcc.org and sign in.
    - If you're using the MSK MyChart app, open the app and log in.
2. Open the Menu.
    - If you're using a web browser, select the "Menu" button in the top left corner of the page.
    - If you're using the MSK MyChart app, tap the "Menu" icon (the 3 vertical bars) in the top left corner of the screen.
3. Scroll down to the "Sharing" section and select "Sharing Hub." You can also type "sharing hub" into the search bar at the top of the menu.
4. Select "Yourself," even though you will be sending the

images to a healthcare provider. You will choose who will get the images later.

5. Select “Request a formal copy.”
6. Select “Me”
7. Answer the questions and select the checkbox next to Radiology Imaging.

If you choose not to sign up for MSK MyChart, you can ask for a personal copy of your radiology images by contacting our Release of Information department. You can email them at HIMROI@mskcc.org or call them at 212-639-7302. We can send your radiology images to you electronically or on a CD.

How are my scans read?

A radiologist is a doctor who specializes in medical imaging. Your radiologist will look at your scan images and write a report to your doctor. First, they may review your medical record. This lets them learn more about your health conditions and the treatments you had. If there are other scans in your MSK medical record, your radiologist will compare them to look for changes. The report will have your radiologists findings (observations).

What if I don't understand the report?

Radiologists use medical words to explain your health to other members of your care team. For most people, it's common not to know the meaning of some words. You can find definitions below and on websites such as www.radiologyinfo.org

Don't try to understand the results by yourself. Instead, talk with your doctor. They can help you understand the report, based on your medical history, physical examination, laboratory tests, and past radiology exams.

Here are some common terms used in radiology reports and what they mean.

General terms	
Artifact	Something that shows up in your scan that can make it harder for your radiologist to interpret the images. The artifact can be caused things such as metal in your body, or if you move during the scan.
Benign	Something that is not a cancer.
Indeterminate	This finding is seen in a few health conditions. We can't make a diagnosis just from the imaging study.

Infectious/inflammatory	Something in your scan that can be caused by an infection or inflammation (swelling). The swelling may be from a reaction to a drug, or an immune response.
Lesion	An area that looks unusual. A lesion can be benign (not cancer) or malignant (cancer).
Malignant	A cancer tumor that can spread to other parts of the body.
Mass	Abnormal tissue that can be benign (not cancer) or malignant (cancer).
Metastasis	A piece of tumor that has spread from the main tumor (also known as the primary tumor).
Nodule	A rounded or oval growth that can be benign (not cancer) or malignant (cancer).
Nonspecific	The finding is seen in many different conditions.
Physiologic	A normal situation for how your body works.

Reference range	Test results are often reported as numbers. To understand the numbers, we compare them to what's normal for most people. A "reference range" tells you what numbers are usually normal. Comparing your numbers to the reference range can show you and your doctor if there's a problem.
Tumor deposit, tumor implant	Words to describe a piece of tumor somewhere in the body.
Unremarkable	We found nothing abnormal or wrong to report about that part of your body.

Findings in body parts	
Atelectasis	A complete or partial collapse of some part of your lung. This often happens because your air sacs are deflated (have no air). Atelectasis is very common. It can show up in the image if you did not take a complete breath. Sometimes it shows up because extra fluid is in the space around your lung. This is called a pleural effusion.
Blastic lesion, sclerotic lesion	Area where your bones grow faster.
Cyst in kidney or liver	A cyst is a pocket filled with fluid or other material. They are common, and usually not cancer. If a cyst concerns your radiologist, you may have more tests.

Diverticulum (or several diverticula, diverticulosis)	An outward bulging, most often found in the colon (large intestine). It is not cancer.
Fatty liver (also called hepatic steatosis)	This is a common finding that shows a higher amount of fat in the liver. It can be caused by liver disease or other conditions.
IPMN in pancreas	This is an abbreviation for Intraductal Papillary Mucinous Neoplasm. It is common and usually is not cancer. In a small number of cases, it can develop into cancer. Often, an IPMN needs follow-up imaging tests. The tests check if the lesion has grown or changed over time.
Lymph node sizes	The normal size of a lymph node depends on its location. Lymph nodes can get bigger for many reasons, such as an infection or tumor growth. Radiologists describe the sizes of enlarged (bigger) lymph nodes. Your doctor will interpret that information based on the disease you have.
Lytic lesion	An area within a bone of destroyed bone.
Opacity	A part of the lung that looks different than normal lung. It can be benign (not cancer) or malignant (cancer).
Stenosis, stricture	A narrowing of tubes, such as the ones that carry blood or are connected to the kidneys or intestines.

PET-CT	
Metabolic activity	The chemical changes that take place in cells and tumors.
Physiologic uptake (at PET-CT)	The normal use of sugar that all cells in the body need to survive.
SUV and liver reference values (at PET-CT)	During a PET scan, you're injected with radioactive material. Standardized Uptake Value (SUV) shows how much of that injected substance is found in an area of your body. Your PET scan report records this measurement.

CT	
Attenuation	This shows how much energy from X-rays is absorbed by a tissue or other substance in your body. We sometimes use it to describe a narrowing of tubes, such as the ones that carry blood.

MRI	
Hyperintense	Something that is brighter than another part of the image, such as muscle or liver.
Hypointense	Something that is darker than another part of the image, such as fat.
Signal	The brightness or darkness of each point in an image. Tissues and other substances give off different amounts of signal.

Ultrasound (Sonogram)	
Echogenic (also called hyperechoic)	A material or substance that is brighter than the area around it on the ultrasound image.
Hypoechoic	A material or substance that is darker than the area around it on the ultrasound image.

The report mentions tiny lung nodules, or nodular thickening of adrenal gland. What does that mean?

Radiologists use words to describe what they see on the pictures of your insides. When an organ has something that usually is not there, we can describe it as a lesion, nodule, mass, lump, thickening, or nodularity (see list of definitions). These findings are not specific. Often, they do not mean there is cancer.

For example, a CT scan of a lung finds a tiny, benign (not cancer) nodule in about 2 out of every 3 people. It's often from scars from a past infection. We usually monitor these tiny or nonspecific lesions at follow-up exams. Benign lesions in general will not grow.

What does "too small to characterize" mean?

Radiology equipment can show many tiny flaws inside your body. Just as no 2 people look the same from the outside, their insides also look different. Most of the time, tiny

lesions are so small radiologists describe them as “too small to characterize.”

They usually do not mean there is a serious problem. Many are benign (not cancer) cysts, for example. We usually monitor them at follow-up exams. Benign lesions in general will not grow.

The report mentions a possible tumor in a part of my body different from the one that was tested. Why?

An imaging scan can show an abnormality (something that isn’t normal) in a different area than the one tested. You may not have any symptoms in this area. These “incidental” (additional) findings (observations) often are not serious.

Sometimes, they can mean there’s a major problem. Finding the problem before it causes symptoms is very useful. That’s why radiologists mention these results in their reports. They also can recommend what steps to take.

What is an anatomic variation?

Everyone’s insides are not arranged the exact same way. Before birth, our bodies develop small differences. They’re usually are normal and will not harm you.

Why did my radiologist recommend another test?

Each kind of radiology scan gives certain information about the body. The information is different for each test, because each scan makes images of your body in different ways.

Another type of scan can give new, different information than a test you already had. Also, your radiologist can see something on one kind of scan, but not on another. Your doctor will decide the next steps in your treatment.

Why did the radiologist recommend close-interval follow-up imaging in my report?

Many scans show results that are not important to your health. We learn if it's important by repeating a test. We often will ask you to get another scan either weeks or months later.

The second scan can tell us if the lesion grew or changed. A lesion that does not grow or change is less of a concern than one that does. It may not need testing, such as a biopsy (taking tissue samples from the lesion).

How is a PET-CT scan different from a CT scan?

A CT scan uses x-rays to make a detailed view of the inside of your body. The

A PET-CT scan is an imaging procedure that uses radiation from an injected medicine. We use a PET-CT scan to find or check the growth of cancer tumors. We also use it to check the health of your tissues and organs.

The CT part of a PET-CT scan mostly helps your radiologist read the PET scan. CT scans use a very low dose of X-rays to take pictures. These CT pictures are not as clear as the ones from a regular CT scan. Your doctor may order a different kind of CT scan to get more information.

Should I be worried about radiation exposure from my CT or PET-CT scan?

A scan uses a very small amount of radiation to let your radiologist see the inside of your body. The dose of radiation is at the lowest level possible to make the images your radiologist needs. Your doctor ordered the scan because its benefits are greater than the very small risk caused by the radiation. Visit www.radiologyinfo.org/patient-safety to learn more about radiation doses.

My report's impression section does not mention everything that's in the findings section. Why?

Radiology scans, such as CTs and MRIs, show thousands of details inside the body. Radiologists are doctors trained to recognize signs of disease or good health in different kinds of scans.

In the Findings section, they write their observations (findings) about items that may interest the doctor who ordered the test. In the Impression section, they give a summary of their findings. They choose the ones that are most important to your doctors so they can make decisions about your treatment.

On follow-up scans, a different radiologist often re-measures the size of a lesion. Why do they get different measurements of the same lesion?

Measurements in radiology are not perfect. A lesion often has an uneven shape, fuzzy borders, or a different position. We expect to see slight differences in measurements. They usually are not big enough to need changes in your treatment plan.

Why do my radiology reports from MSK look different from my reports from my other healthcare providers?

Reports from MSK look different from other radiology providers' reports, which have many paragraphs. At MSK, we use a special format called standardized reporting. Each of the more than 300 different types of imaging studies performed at MSK has its own format. It shows the results that are most important to your care plan. Our reports are easier to read and understand, and are more consistent.

What do the numbers at the end of my report mean?

Every MSK radiology report has numbers printed at the bottom, called a standardized certainty lexicon. Our radiologists estimate the probability (chance) that you have a diagnosis. The numbers tell you whether it's likely a lesion could be a health problem. We don't do these estimates for breast scans.

Consistent with	Greater than 90%
Suspicious for/Probable/Probably	About 75%
Possible/Possibly	About 50%
Less likely	About 25%

Unlikely	Less than 10%
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If you have any questions about your radiology test results, please contact your MSK healthcare provider.

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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