A patient presents to the Emergency Room with a two to three day history of right lower quadrant abdominal pain, worsening in intensity; low-grade fever; and tenderness to palpation over the right lower abdomen, slightly toward midline. Diagnostic images show:

Figure 1. Computed Tomography scan with oral and IV contrast demonstrates a large, distended tubular structure in the right lower abdomen consistent with an inflamed appendix.

Figure 2. (same patient) Computed Tomography scan identifies an appendicolith within the center of the enlarged appendix.

Given the clinical scenario, this provides radiographic proof of acute appendicitis.

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