# Row 10188

Visit Number: 15559383aa5bf47fd4bf37851cd2e05ca026a7de80053eee654e1e1712dd3b92

Masked\_PatientID: 10188

Order ID: 594a8fb908b96ed852a9511a794fa4ec455ee8a2a37c7572d95ebc19ae2ece30

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 11/3/2015 11:01

Line Num: 1

Text: HISTORY right fungating breast mass TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Optiray 350 - Volume (ml): 80 FINDINGS There is no comparison study. THORAX There is a suspicious appearing heterogeneously enhancing large 14.1 x 7.8 cm mass within the right breast which extends to and involves the overlying skin. This lesion also abuts the underlying pectoralis major muscle. In the medial right breast, there are several solid nodules which appears separate from this mass but are also highly suspicious in appearance. There are enlarged lymph nodes in bilateral axilla, most likely metastatic. Borderline right supraclavicular lymph nodes are also suspicious. Anterior diaphragmatic lymph nodes are small volume indeterminate. There is no other significantly enlarged mediastinal or hilar lymph node. No pericardial effusion or cardiomegaly is identified. There are a few pulmonary nodules in both lungs, suspicious for pulmonary metastases. No pulmonary consolidation or pleural effusion is seen. ABDOMEN PELVIS Numerous bilobar hepatic metastases are present, largest in segment VII/VIII, measuring 5.5 x 5.2 cm. Patent portal and hepatic veins are noted. There is no biliary dilatation. The spleen, adrenal glands, gallbladder, pancreas and kidneys are unremarkable. Bowel is normal in calibre. There is a right corpus luteum but no suspicious pelvic mass. Small amount of fluid in the pelvis may still be physiological. The lucent bony lesions in T6 and T10 vertebra bodies are probably metastatic. CONCLUSION There is a large right breast mass which involves the overlying skin and abuts the underlying pectoralis muscle. This is highly suspicious for malignancy. Metastatic bilateral axillary, right supraclavicular lymph node. A few bilateral pulmonary metastases. Numerous hepatic metastases. A few bony metastases. Small amount of pelvic fluid may be physiological. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: edddef0481431e701e3e414ace0cfbbe08b2c74867418c8f16fae55935695c89

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