# Row 10275

Visit Number: 896834c5f8d2d140ee47628e1b7d44afa160ee6521c0d7bbcc93e190e3118963

Masked\_PatientID: 10220

Order ID: 96cdfe84feb2350cdd85c34fb779e5a93384cedeba58ec856b5e35d5c2819b3c

Order Name: CT Pulmonary Angiogram

Result Item Code: CTCHEPE

Performed Date Time: 05/12/2018 17:26

Line Num: 1

Text: HISTORY Tro Pulmonary Embolism ESRF on Hemodialysis B/g Child's C Alcoholic Liver Cirrhosis Cx : hepatic Encephalopathy. Left massive pleural exudative effusion s/p chest drain. Sepsis sec to Candida UTI and L LZ HAP cx delirium, Recent NSTEMI TECHNIQUE Contrast enhanced scans obtained during the pulmonary angiogram phase. Intravenous contrast: Omnipaque 350 - Volume (ml): 60 FINDINGS Note is made of the unenhanced CT thorax of 17 August 2018 and CT abdomen and pelvis of 5 Dec 2018. There is a filling defect in the right lower lobe posterior basal segmental artery, in keeping with pulmonary embolism (402-56). The remaining major pulmonary arterial branches appear patent. There is coronary artery calcification with mild cardiomegaly. No pericardial effusion is detected. Bilateral central venous catheters are in situ, with the tips at the superior cavoatrial junction. No grossly enlarged mediastinal, hilar, axillary or supraclavicular lymph node is detected. There is a stable small left pleural effusion with compressive atelectasis of the adjacent left lung parenchyma. There is mild focal air trapping in both lungs. No consolidation is detected. Stable focal bronchiectasis noted in the left upper lobe (401-30). The limited sections of the upper abdomen again reveal known cirrhosis, ascites and uncomplicated cholelithiasis. The nasogastric tube tip is in the gastric body. No destructive bone lesion is detected. CONCLUSION 1. Filling-defect in the right lower lobe posterior basal segmental artery, compatible with pulmonary embolism. This finding was discussed with Dr Jaydeesh KK Balasubramanian via telephone at the time of reporting. 2. Other findings: stable small left pleural effusion, cardiomegaly, liver cirrhosis, ascites, gall stones. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 1b519b793157f56eff266394785e3b2cb316d6f88bff700cd68397b8cb19dcdc

Updated Date Time: 05/12/2018 17:55