# Row 10705

Visit Number: 4d09f8bbed8d72a7675c0652360985d5adcf2ba48ad030716767d834332510bd

Masked\_PatientID: 10697

Order ID: 20e056542c7942dac3018769507a03dca6ea0732c08d2c26924709958cb74237

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 24/6/2017 21:38

Line Num: 1

Text: HISTORY Right loin to groin pain x3/7 ?renal colic; Fluid overload on b/g of peri-ampullary Ca mets to liver REPORT CHEST AP SITTING The chest radiograph of 12 May 2016 was reviewed. The CT chest study of 12 April 2017 was also reviewed. There is interim removal of the right central venous catheter. No consolidation or pleural effusion is detected. Small nodular opacities in the left upper and right lower zones measuring 7mm are not seen in the previous chest radiograph and are suspicious for pulmonary metastases in the context of known malignancy. There is a smooth rounded soft tissue density with gas lucency within projected over the left lower zone, in keeping with known left diaphragmatic hernia witha partially herniated bowel loop or stomach. Mild elevation of the right hemidiaphragm may be related to mass effect from known hepatic metastases. The heart size is normal. Aortic arch calcification is seen. No subdiaphragmatic free gas isseen. Thoracolumbar spondylosis is noted. May need further action Finalised by: <DOCTOR>

Accession Number: 2845a1313c172939e65a2151446f3ccab7fa01701717f6d71ffa64727ce1bdf8

Updated Date Time: 25/6/2017 8:47