# Row 1093

Visit Number: 26fcc20ef5391a863417b89a8b55e2de96d689f3fe4cdcdeb28345a44cda1875

Masked\_PatientID: 1093

Order ID: 489e603ace4d962e2c88455dc4c8aaec7813d8c9e44e56e4702ddbad41309d31

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 03/4/2015 9:48

Line Num: 1

Text: HISTORY neurosarcoma, recurrent; solitary L humerus osteolytic mets for evaluation of other sites of mets TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Nil FINDINGS There are several scattered well-defined subcentimetre pulmonary nodules in the lungs bilaterally. For example, in the right upper lobe (image 22), middle lobe (image 50), right lower lobe (image 51), left upper lobe (image 40) and left lower lobe (image 50). These are inkeeping with pulmonary metastases. Mild atelectasis are noted in the left lower lobe with slivers of bilateral pleural effusions. No significantly enlarged mediastinal lymph node is detected. Within the limits of this unenhanced study, no gross mass is detected in the liver, spleen, pancreas, adrenal glands and left kidney. Stable large exophytic cyst is again seen in the right kidney lower pole. There is no hydronephrosis. Multiple scattered calcified foci are again noted, suggestive of calcified atherosclerotic disease. The gallbladder shows tiny stones with no associated gallbladder wall thickening or pericholecystic inflammatory change. The bowel loops are grossly unremarkable. No significantly enlarged intra-abdominal lymph node or ascites is seen. The suboptimally distended urinary bladder is also grossly unremarkable. Left inguinal hernia containing mesenteric fat without stranding or fluid is noted. Lobulated hypodense mass is again noted in the left proximal thigh anteriorly, abutting the anterior thigh muscles. It measures 4.3 x 3.4 cm. A smaller mass medially measures 3.3 x 2 cm, suspicious for metastatic adenopathy. They are largely unchanged. CONCLUSION 1. Largely stableleft inguinal and proximal thigh masses, suspicious for metastatic adenopathy. 2. Several new subcentimetre pulmonary nodules in the lungs bilaterally, highly suspicious for pulmonary metastases. 3. Small pleural effusions. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 63368e6312935cc4aec80b956c99bcf7e7ebf9c08d5274e5baaf2baaf9ed2760

Updated Date Time: 03/4/2015 12:29

## Layman Explanation

This radiology report discusses HISTORY neurosarcoma, recurrent; solitary L humerus osteolytic mets for evaluation of other sites of mets TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Nil FINDINGS There are several scattered well-defined subcentimetre pulmonary nodules in the lungs bilaterally. For example, in the right upper lobe (image 22), middle lobe (image 50), right lower lobe (image 51), left upper lobe (image 40) and left lower lobe (image 50). These are inkeeping with pulmonary metastases. Mild atelectasis are noted in the left lower lobe with slivers of bilateral pleural effusions. No significantly enlarged mediastinal lymph node is detected. Within the limits of this unenhanced study, no gross mass is detected in the liver, spleen, pancreas, adrenal glands and left kidney. Stable large exophytic cyst is again seen in the right kidney lower pole. There is no hydronephrosis. Multiple scattered calcified foci are again noted, suggestive of calcified atherosclerotic disease. The gallbladder shows tiny stones with no associated gallbladder wall thickening or pericholecystic inflammatory change. The bowel loops are grossly unremarkable. No significantly enlarged intra-abdominal lymph node or ascites is seen. The suboptimally distended urinary bladder is also grossly unremarkable. Left inguinal hernia containing mesenteric fat without stranding or fluid is noted. Lobulated hypodense mass is again noted in the left proximal thigh anteriorly, abutting the anterior thigh muscles. It measures 4.3 x 3.4 cm. A smaller mass medially measures 3.3 x 2 cm, suspicious for metastatic adenopathy. They are largely unchanged. CONCLUSION 1. Largely stableleft inguinal and proximal thigh masses, suspicious for metastatic adenopathy. 2. Several new subcentimetre pulmonary nodules in the lungs bilaterally, highly suspicious for pulmonary metastases. 3. Small pleural effusions. Further action or early intervention required Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

No diseases detected.  
No specific organs mentioned.  
No symptoms mentioned.