# Row 11985

Visit Number: 6b0953cff8f668f35ee95cfaed64bf79b01b93ff60ec3ea9f9292fa29a278938

Masked\_PatientID: 11985

Order ID: b03afa8875722e1da3d4cb0963032fa6dd2c51849d8b80a3e028398f5e73b9fc

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 20/3/2017 15:46

Line Num: 1

Text: HISTORY right hyponchondrium pain TRO intra-abdo pathology admitted for AKI TECHNIQUE Scans of the thorax, abdomen and pelvis were acquired. No intravenous contrast was given due to renal impairment. FINDINGS Comparison was made with the HRCT thorax dated 15/7/2015 and CT colonogram dated 25/9/2016. The patient is status post bilateral lung transplant. Clam shell sternotomy noted. Stable scarring noted in the anterior lungs, around the sternotomy site. Stable 4 mm subpleural nodule in the anterior right lower lobe, abutting the oblique fissure (204-70). No new pulmonary nodule or consolidation is seen. There is no pneumothorax. Small left pleural effusion. Stable small pockets of fluid noted along the right mediastinal pleura. The heart is mildly enlarged. Previous mitral valve annuloplasty. Surgical clips noted in the hilar regions. Mildly patulous oesophagus with no gross stenotic mass. Multiple hypodensites scattered in both lobes of the liver, measuring up to 1.8 cm in segment V of the liver. The larger ones are cysts; The smaller ones are too small to characterise but probably also cysts. A few tiny calculi are seen in the distended gallbladder. No contour deforming mass is seen in the unenhanced pancreas, spleen, adrenal glands or kidneys. Bilateral perinephric fluid stranding is nonspecific. There is no hydronephrosis. Right femoral central venous catheter with tip at the origin of the IVC. The bowel loops are normal in calibre. The appendix is seen and is not dilated. There are multiple uncomplicated colonic diverticula, especially in the sigmoid colon. There is no enlarged abdominal or pelvic lymph node. There is no ascites. The urinary bladder is catheterised and is collapsed. Prostate gland is not enlarged. Previous right thoracotomy with division of the 4th rib. No destructive bony lesion. . CONCLUSION Within limits of this unenhanced scan. There is no grossmass, abscess or fluid collection. No pneumoperitoneum or ascites. Known / Minor Finalised by: <DOCTOR>

Accession Number: 9a5aa96a905f57acd4248945833006ccb65a621cd579f7278e6800594ecba7b9

Updated Date Time: 20/3/2017 16:31