# Row 12252

Visit Number: 61617242e8e6dd7c22195a1b7a3177f63b2fd62760f0f24f6ffe2ae1d8e1ac7c

Masked\_PatientID: 12249

Order ID: 56c5448220bb6f10be9f12b8ada59748d64b2c56d8e0cee27647d67258d4af1d

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 05/10/2017 11:53

Line Num: 1

Text: HISTORY planning for early CABG severe triple vessel disease CXR has aortic arch calcification - to assess further TECHNIQUE Unenhanced scans of the thorax obtained. FINDINGS AORTA There is minimal mural calcification of the ascending aorta with mild-to-moderate mural calcification of the aortic arch and descending thoracic aorta. No periaortic fluid or fat stranding is detected. Prominent coronary artery calcification is seen. The heart is normal in size. No pericardial effusion is evident. OTHER FINDINGS The left thyroid lobe is enlarged by vague hypodense lesions with specks of calcium (6-5). No grossly enlarged mediastinal or hilar lymph node is detected. A few borderline enlarged right axillary lymph nodes are seen (up to 1.2 cm, image 6-24). No suspicious pulmonary nodule, mass or consolidation is seen. The central airways are patent. No pleural effusion is detected. The upper abdomen appears grossly unremarkable. No destructive bone lesion is seen. CONCLUSION 1. Mild mural calcification of the ascending aorta. Mild-to-moderate calcification of the aortic arch and descending aorta. 2. Enlarged left thyroid lobe due to hypodense nodules with calcification. Ultrasound suggested for further evaluation. 3. Non-specific borderline enlarged right axillary lymph nodes. May need further action Finalised by: <DOCTOR>

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