# Row 12422

Visit Number: dbc19e9624d0d5db6205ae818003d47e221a956752db3cef68996e0a4dddb524

Masked\_PatientID: 12412

Order ID: bd11b194994b884a8c4dda34d140a82fda6d4e9cda5e1eb447b8adb934710c35

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 15/10/2019 11:14

Line Num: 1

Text: HISTORY LUL spiculated nodule, larger since 2013 TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Nil FINDINGS Comparison is made with the prior studies of 25 April 2019, 1 October 2018 and 27 September 2013. The irregular nodule in the apical segment of the left upper lobe (1.5 cm) (series 3, image 24) is unchanged in size and configuration. It has air bronchograms and does not appear to occlude the airways leading up to the opacity. The opacity is present on the to prior scans but not seen on the scan of 2013. Consolidative changes at the middle lobe and lingula segment of the left upper lobe are present and the extent and appearance are stable since 25 April 2019. Bronchiectasis is present in the lateral segment of the middle lobe. The tree in bud changes at the anterior segment of the right lower lobe shows improvement. Areas of bronchiectasis and peribronchial opacification in the lateral segment of the right lower lobe are unchanged. Stable nodularity is present in the lateral segment of the left lower lobe. There are small bilateral pleural effusions which have developed since the prior examination. No gross enlargement of the mediastinal lymph nodes is demonstrated. CONCLUSION The irregular nodule in the apical segment of the left upper lobe appears stable and appears consolidative. It shows no overt cavitation and remains indeterminate for malignancy. No new lesions are demonstrated elsewhere. The rest of the parenchymal changes are consistent with those of bronchiectasis and parenchymal opacification, mainly in the lower zones of both lungs are stable or showing some minor improvement. These changes are in keeping with atypical mycobacterial infection sequelae. Report Indicator: May need further action Finalised by: <DOCTOR>

Accession Number: 9eae8fb9cd66a9db8d720f52331b0ef43c0739cbf5607adb6cecb82af31288ad

Updated Date Time: 16/10/2019 10:48