# Row 12510

Visit Number: 91ac6ac8f38de6c413232fbd32ecee35970ead2276228d1e87a8ee67382d33f2

Masked\_PatientID: 12497

Order ID: 7dccafb9d7c89a778b3d1e89109eea585252beda486202f4ac0f72b46e037fa6

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 09/6/2016 19:00

Line Num: 1

Text: HISTORY metastatic yolk sac tumour on chemo Persistent neutropenic sepsis with SOB/tachy ++ - no obvious source TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 75 FINDINGS Comparison is made previous CT of May 2016. Previously seen large left pleural effusion is slightly smaller now of a moderate to large amount. The right-sided pleural effusion is increased, now about the same amount as on the left. There is bilateral associated left lower lobe compressive atelectasis. The aerated lungs do not show any discrete sinister nodules. A new small filling defect a proximal segmental branch to the ® upper lobe is suspicious for acute pulmonary embolus (4/33). Another is suspected in a branch to the lingula lobe. There is no grossly enlarged hilar or mediastinal lymph nodes, or pericardial effusion. The small liver parenchyma nodule segment five is largely resolved. The adjacent peritoneal deposits of the capsule of the liver in the right lobe have also improved since substantially. The numerous peritoneal and omental deposits is also less extensive with reduction in size of the multiple loculated pockets of ascites with thickened peritoneum. The small bowel dilatation has largely resolved. The spleen, pancreas, adrenals and both kidneys and urinary bladder are grossly unremarkable. The biliary and urinary tracts are not grossly dilated. Widespread stranding of the subcutaneous fat in keeping with edema. Bone settings show no destructive lesion. CONCLUSION Small acute bilateral pulmonary emboli. Bilateral large pleural effusions although there is interval reduction on the left. Peritoneal metastatic disease has improved but there is still extensive disease. Further action or early intervention required Albert Low Su Chong , Senior Consultant , 08073Z Finalised by: <DOCTOR>

Accession Number: 147b5f587e3624cfbd30e1edad19da9109d228da151d9aea3ba862adc831b5af

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