# Row 1767

Visit Number: 9db531cfeabfb724331ca406e21d93af6bd3cb5378ff4abacae9c3659cd5ecb2

Masked\_PatientID: 1766

Order ID: 8bd8f6b4025c0510f389fd7bf547d30d3bae8fd6271c86636a64c3eda1793da7

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 14/12/2015 14:58

Line Num: 1

Text: HISTORY Right pneumonia. Neutropenic fever; MDS TECHNIQUE CT thorax employing 50 ml iohexol 350 was procured and read in conjunction with the CT abdomen and pelvi of 3/5/11. FINDINGS There is clear-cut confluent consolidation in the lateral segment of the middle lobe, as well as in the paravertebral aspect of the apical segment of the right lower lobe implying on-going pneumonia. The tiny non-specific nodules in the upper lobes and apical segment of the right lower are deemed inflammatory nodules. There is substantial right apical pleural thickening. There is sliver of dependent right pleural effusion. There are no appreciably enlarged supraclavicular, mediastinal or hilar lymph nodes. The appended upper abdomen reveals the same tiny low-density lesions (cysts) in segments 8, 7 and interface of segments 5/6. The spleen is not enlarged. There is no destructive bony lesion. CONCLUSION There is on-going pneumonia in the lateral segment of the middle lobe and paravertebral aspect of the apical segment of the right lower lobe. Tiny inflammatory nodules in the upper lobes and apical segment of the right lower lobe are evident. There is a sliver of dependent right pleural effusion. May need further action Reported by: <DOCTOR>

Accession Number: b345062f4deb27f51c8bb09dbc63008d9a677ad893c70b01c30ada3d1ab8ae2d

Updated Date Time: 14/12/2015 16:01

## Layman Explanation

This radiology report discusses HISTORY Right pneumonia. Neutropenic fever; MDS TECHNIQUE CT thorax employing 50 ml iohexol 350 was procured and read in conjunction with the CT abdomen and pelvi of 3/5/11. FINDINGS There is clear-cut confluent consolidation in the lateral segment of the middle lobe, as well as in the paravertebral aspect of the apical segment of the right lower lobe implying on-going pneumonia. The tiny non-specific nodules in the upper lobes and apical segment of the right lower are deemed inflammatory nodules. There is substantial right apical pleural thickening. There is sliver of dependent right pleural effusion. There are no appreciably enlarged supraclavicular, mediastinal or hilar lymph nodes. The appended upper abdomen reveals the same tiny low-density lesions (cysts) in segments 8, 7 and interface of segments 5/6. The spleen is not enlarged. There is no destructive bony lesion. CONCLUSION There is on-going pneumonia in the lateral segment of the middle lobe and paravertebral aspect of the apical segment of the right lower lobe. Tiny inflammatory nodules in the upper lobes and apical segment of the right lower lobe are evident. There is a sliver of dependent right pleural effusion. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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