# Row 2125

Visit Number: b98691792634f256e6a18d5fb082da5a405f350305e4f2535a3380e3752f1ff7

Masked\_PatientID: 2121

Order ID: 3c57c1687c0a2cccc758ca3c581f240566522f0525f832c6d562ea9416ae301e

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 13/6/2015 23:23

Line Num: 1

Text: HISTORY Involved in RTA. Front car collided and chest hit against motorbike handlebar and now c/o severe chest pain on inspiration. 2cm bruise noted lower mid sternum. CXR noted small pleural effusion. TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS The radiographs on 13 June 2015 were reviewed. Large anterior mediastinal haematoma is detected in the retrosternal region causing mass effect over the adjacent heart. No obvious displaced sternal fracture identified. The haematoma approximately measures 12 x 9.2 x 2.7 cm (CC x Width x AP). Mild fat stranding is noted in the subcutaneous soft tissue at the mid sternal level (Im 3/56). Moderate amount of right hemothorax with compressive atelectasis of the adjacent lung is noted. Mild left apical scarring is seen. There is no pneumothorax. Small amount of left pleural effusion is noted. Heart size is normal. Moderate amount of hemopericardium is seen measuring upto 14 mm in thickness. The internal mammary arteries opacify normally. The thoracic aorta and branches are unremarkable. There is no supraclavicular, mediastinal, hilar or axillary lymphadenopathy. A 10mm hypodense lesion with rim calcification is noted in the right lobe of the thyroid. There is an incidental 4.7 cm infrarenal fusiform abdominal aortic aneurysm. A few subcentimetre hypodensities are seen in both kidneys, too small to characterise. A 1.2 cm enhancing lesion in segment VII is non-specific (Im 3/84). Old left midclavicular and left 4th rib fractures are noted. No acute rib or sternal fracture is seen. No obvious spinal injury. CONCLUSION 1. Large anterior mediastinal haematoma and moderate haemopericardium. No sternal fracture. 2. Moderate right hemothorax. Small left pleural effusion. No pneumothorax or acute rib fracture. Dr. Riece was informed by Dr. Faimee at 1150 hour, 13 June 2015. Critical Abnormal Reported by: <DOCTOR>

Accession Number: f3c7f5cd07e989d7c30e24934626257a14551b2a8d23627a92882d07ee7770bd

Updated Date Time: 14/6/2015 0:38

## Layman Explanation

This radiology report discusses HISTORY Involved in RTA. Front car collided and chest hit against motorbike handlebar and now c/o severe chest pain on inspiration. 2cm bruise noted lower mid sternum. CXR noted small pleural effusion. TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS The radiographs on 13 June 2015 were reviewed. Large anterior mediastinal haematoma is detected in the retrosternal region causing mass effect over the adjacent heart. No obvious displaced sternal fracture identified. The haematoma approximately measures 12 x 9.2 x 2.7 cm (CC x Width x AP). Mild fat stranding is noted in the subcutaneous soft tissue at the mid sternal level (Im 3/56). Moderate amount of right hemothorax with compressive atelectasis of the adjacent lung is noted. Mild left apical scarring is seen. There is no pneumothorax. Small amount of left pleural effusion is noted. Heart size is normal. Moderate amount of hemopericardium is seen measuring upto 14 mm in thickness. The internal mammary arteries opacify normally. The thoracic aorta and branches are unremarkable. There is no supraclavicular, mediastinal, hilar or axillary lymphadenopathy. A 10mm hypodense lesion with rim calcification is noted in the right lobe of the thyroid. There is an incidental 4.7 cm infrarenal fusiform abdominal aortic aneurysm. A few subcentimetre hypodensities are seen in both kidneys, too small to characterise. A 1.2 cm enhancing lesion in segment VII is non-specific (Im 3/84). Old left midclavicular and left 4th rib fractures are noted. No acute rib or sternal fracture is seen. No obvious spinal injury. CONCLUSION 1. Large anterior mediastinal haematoma and moderate haemopericardium. No sternal fracture. 2. Moderate right hemothorax. Small left pleural effusion. No pneumothorax or acute rib fracture. Dr. Riece was informed by Dr. Faimee at 1150 hour, 13 June 2015. Critical Abnormal Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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