# Row 2399

Visit Number: bc840b853a4b02b6e63285a0a05e873a86608dfdccc5be9f433a7e79fa615059

Masked\_PatientID: 2393

Order ID: 5b7595a35a00886392c912ef59f0e8f84969663b548b89f625327315194cd46f

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 01/3/2019 20:09

Line Num: 1

Text: HISTORY AKI vs CKD for further evaluation.Hx of right hemicolectomy with stoma TECHNIQUE Scans of the abdomen were acquired after the administration of intravenous contrast medium. Intravenous contrast: Contrast volume (ml): FINDINGS Comparison is made with the prior scan performed on 6 May 2017. Abdomen and pelvis Both kidneys are morphologically unremarkable with the right measuring 9 cm and left measuring 9.3 cm. No overt renal cortical thinning is present. There is deformity at the right lower pole with a partially exophytic 1.4 cm nodule that may be due to a hyperdense or ISO dense renal cysts. Minor cortical irregularity at the upper pole of the left kidney is associated with some cortical loss and is stable. A left interpolar 1.8 cm cyst is present. There is also a small 3 mm stone at the lower pole of the left kidney. No stones are seen in the ureters and no hydronephrosis is demonstrated. No intra vesical abnormality is seen but multiple calculi are present within the urinary bladder. The prostate is mildly enlarged and measures 5.1 x 3.9 cm The bowel shows no suspicious thickening or dilatation. The transverse colostomy is present with a small parastomal hernia. Stones arepresent within the gallbladder. There is no biliary dilatation. The liver has a smooth outline with no overt hepatic parenchymal lesion. The pancreas spleen and the adrenals are unremarkable. There are no enlarged abdominal or pelvic lymph nodes. A small right inguinal hernia is present. Thorax There is some dependent atelectasis in the periphery of the lower lobes more marked at the left lower lobe. The airways are unremarkable. No enlarged hilar or mediastinal lymph nodes are demonstrated. The heart size is normal. Calcification of the coronary arteries is present. CONCLUSION There is a stone at the lower pole of the left kidney and this is new. There is interim development of multiple bladder calculi. Gallstones are present. Report Indicator: May need further action Finalised by: <DOCTOR>

Accession Number: 31a36a208f4c7e37253dce44698202e27e77fb7bcc382cf5c4cd859ab7da72f7

Updated Date Time: 02/3/2019 10:57

## Layman Explanation

This radiology report discusses HISTORY AKI vs CKD for further evaluation.Hx of right hemicolectomy with stoma TECHNIQUE Scans of the abdomen were acquired after the administration of intravenous contrast medium. Intravenous contrast: Contrast volume (ml): FINDINGS Comparison is made with the prior scan performed on 6 May 2017. Abdomen and pelvis Both kidneys are morphologically unremarkable with the right measuring 9 cm and left measuring 9.3 cm. No overt renal cortical thinning is present. There is deformity at the right lower pole with a partially exophytic 1.4 cm nodule that may be due to a hyperdense or ISO dense renal cysts. Minor cortical irregularity at the upper pole of the left kidney is associated with some cortical loss and is stable. A left interpolar 1.8 cm cyst is present. There is also a small 3 mm stone at the lower pole of the left kidney. No stones are seen in the ureters and no hydronephrosis is demonstrated. No intra vesical abnormality is seen but multiple calculi are present within the urinary bladder. The prostate is mildly enlarged and measures 5.1 x 3.9 cm The bowel shows no suspicious thickening or dilatation. The transverse colostomy is present with a small parastomal hernia. Stones arepresent within the gallbladder. There is no biliary dilatation. The liver has a smooth outline with no overt hepatic parenchymal lesion. The pancreas spleen and the adrenals are unremarkable. There are no enlarged abdominal or pelvic lymph nodes. A small right inguinal hernia is present. Thorax There is some dependent atelectasis in the periphery of the lower lobes more marked at the left lower lobe. The airways are unremarkable. No enlarged hilar or mediastinal lymph nodes are demonstrated. The heart size is normal. Calcification of the coronary arteries is present. CONCLUSION There is a stone at the lower pole of the left kidney and this is new. There is interim development of multiple bladder calculi. Gallstones are present. Report Indicator: May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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