# Row 3309

Visit Number: 3c3b584c69f97a58da27fadc03371068ec066270e49753603e4ab1c73848db9d

Masked\_PatientID: 3306

Order ID: e3a8badf58ef96501590439dbb179337d63da5e0714c36697dcd1c272d2571bf

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 29/3/2019 19:32

Line Num: 1

Text: HISTORY b\g breast Ca with seizure to evaluate for brain mets TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 70 FINDINGS Compared with previous CT study dated 21\09\2018. Note also made of previous CT studies. A left breast mass with thickening of the overlying skin and stranding is noted again, appearing fairly similar. Previously seen enhancing subcutaneous nodule is not discretely identified in current scan. Small volume right axillary nodes, stable. No significantly enlarged left axillary lymph nodes. Small volume supraclavicular lymph node (4-6), stable. Mediastinal vasculature enhances normally. No enlarged mediastinal or hilar lymph nodes. A ground-glass nodularity in the right middle lobe along fissure (5-40) appears stable. No other discrete lung nodules are seen. Calcified granulomas in right lung are stable. No pleural or pericardial effusions. Airways are patent. A couple of hepatic hypodensities are seen some of these example in segment five are stable (8-46). Some appear marginally more prominent compared to previous CT study for example an ovoid hypodensity in segment VII (8-27) as well as some other hypodensities (8-29) are marginally more prominent now. These however appear nonspecific. Attention at follow-up suggested. The other ovoid hypodensity in segment VI (8-51) stable. The gallbladder, spleen, pancreas, adrenal glands and kidneys appear unremarkable save for a tiny left renal hypodensity, too small for characterisation. The calcified lesions at the uterine fundal region, likely fibroids, stable. No adnexal mass, significantly enlarged lymph nodes or ascites. Urinary bladder appears unremarkable. The bowel loops show normal appearance. Bone windows again reveal sclerosis and severe compression of C7 as well as T3 vertebral bodies. Sclerotic area in L3 vertebral body is also stable. There is no interval new areas of sclerosis or bony destruction CONCLUSION Compared with CT study dated 21\09\2018 1. A left breast mass associated with skin thickening appears fairly stable. A previously seen subcutaneous enhancing nodule in the left breast is not discretely identified in current scan. Subcentimetre supraclavicular node, stable. 2. A perifissural ground-glass nodularity in right lung is stable. No interval new or suspicious findings in the chest. 3. A few hepatic hypodensities, some stable, some appear more prominent from previous CT study. Though indeterminate, these appear nonspecific at this stage, attention at follow-up suggested. 4. Stable compression of C7 and T3 vertebral bodies and sclerotic areas in L3 vertebral body. No interval new bony abnormalities. 5. Other minor stable findings as above. Report Indicator: Known \ Minor Finalised by: <DOCTOR>

Accession Number: a004755e4a58618079aa1405fe06c8c79c0d7513972d5b696cddd20925571de6

Updated Date Time: 02/4/2019 10:55

## Layman Explanation

This radiology report discusses HISTORY b\g breast Ca with seizure to evaluate for brain mets TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 70 FINDINGS Compared with previous CT study dated 21\09\2018. Note also made of previous CT studies. A left breast mass with thickening of the overlying skin and stranding is noted again, appearing fairly similar. Previously seen enhancing subcutaneous nodule is not discretely identified in current scan. Small volume right axillary nodes, stable. No significantly enlarged left axillary lymph nodes. Small volume supraclavicular lymph node (4-6), stable. Mediastinal vasculature enhances normally. No enlarged mediastinal or hilar lymph nodes. A ground-glass nodularity in the right middle lobe along fissure (5-40) appears stable. No other discrete lung nodules are seen. Calcified granulomas in right lung are stable. No pleural or pericardial effusions. Airways are patent. A couple of hepatic hypodensities are seen some of these example in segment five are stable (8-46). Some appear marginally more prominent compared to previous CT study for example an ovoid hypodensity in segment VII (8-27) as well as some other hypodensities (8-29) are marginally more prominent now. These however appear nonspecific. Attention at follow-up suggested. The other ovoid hypodensity in segment VI (8-51) stable. The gallbladder, spleen, pancreas, adrenal glands and kidneys appear unremarkable save for a tiny left renal hypodensity, too small for characterisation. The calcified lesions at the uterine fundal region, likely fibroids, stable. No adnexal mass, significantly enlarged lymph nodes or ascites. Urinary bladder appears unremarkable. The bowel loops show normal appearance. Bone windows again reveal sclerosis and severe compression of C7 as well as T3 vertebral bodies. Sclerotic area in L3 vertebral body is also stable. There is no interval new areas of sclerosis or bony destruction CONCLUSION Compared with CT study dated 21\09\2018 1. A left breast mass associated with skin thickening appears fairly stable. A previously seen subcutaneous enhancing nodule in the left breast is not discretely identified in current scan. Subcentimetre supraclavicular node, stable. 2. A perifissural ground-glass nodularity in right lung is stable. No interval new or suspicious findings in the chest. 3. A few hepatic hypodensities, some stable, some appear more prominent from previous CT study. Though indeterminate, these appear nonspecific at this stage, attention at follow-up suggested. 4. Stable compression of C7 and T3 vertebral bodies and sclerotic areas in L3 vertebral body. No interval new bony abnormalities. 5. Other minor stable findings as above. Report Indicator: Known \ Minor Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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