# Row 4201

Visit Number: 8d9e290871d4bd1299cb0f85358afcadceafd0d3d80b8c6f41ba8d2c8dc3c47b

Masked\_PatientID: 4193

Order ID: 816ba810a3caf555934725c0863cab646ab46d9e2b6422adf8f0fad00f5f1273

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 26/5/2018 15:01

Line Num: 1

Text: HISTORY cerebellar lesion - likely metastases. B/G right lung adenocarcinoma s/p right middle lobectomy Dec 2017 TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 66 FINDINGS Comparison made with CT of 27/3/2018 and PET-CT of 10/11/2017. Status post right middle lobectomy (Dec 2017). No lung mass or sinister nodule is noted. There are no suspicious ground-glass changes. Fibrocalcific changes in the right lung apex are relatively unchanged from before, likely due to previous infection. No interval consolidation, cavitating lesion, miliary or tree in bud disease. No interstitial fibrosis, bronchiectasis or emphysema is evident. Major airways are patent. No enlarged supraclavicular, axillary, mediastinal or hilar nodes seen. Tiny right calcified nodes are present. Mediastinal vasculature enhance normally. Heart size is not enlarged. No pericardial or pleural effusion is seen. ABDOMEN ANDPELVIS No suspicious focal hepatic lesion detected. No biliary obstruction discerned. Portal and hepatic veins enhance normally. The gallbladder, spleen, pancreas, adrenals, kidneys, urinary bladder, both adnexa and uterus are unremarkable. Bilateral pelvic venous congestion is present, worse on the left. There is interval resolution of previous right corpus luteum / hemorrhagic cyst. No interval adnexal or pelvic mass is noted. The bowel shows no focal mass or abnormal thickening. No ascites, peritoneal thickening or omental caking is identified. A small bone island is noted in the right iliac bone. No destructive bony lesion is noted. CONCLUSION Since last PET-CT of Nov 2017 and CT thorax of Mar 2018, 1. Status post middle lobectomy. 2. No metastasis seen in the thorax, abdomen and pelvis. 3. Other minor findings as described. May need further action Finalised by: <DOCTOR>

Accession Number: 917f2b2599d196bf2d6f6f861378487158319a0da1cebf7d6f3f06c767d945e4

Updated Date Time: 26/5/2018 18:09

## Layman Explanation

This radiology report discusses HISTORY cerebellar lesion - likely metastases. B/G right lung adenocarcinoma s/p right middle lobectomy Dec 2017 TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 66 FINDINGS Comparison made with CT of 27/3/2018 and PET-CT of 10/11/2017. Status post right middle lobectomy (Dec 2017). No lung mass or sinister nodule is noted. There are no suspicious ground-glass changes. Fibrocalcific changes in the right lung apex are relatively unchanged from before, likely due to previous infection. No interval consolidation, cavitating lesion, miliary or tree in bud disease. No interstitial fibrosis, bronchiectasis or emphysema is evident. Major airways are patent. No enlarged supraclavicular, axillary, mediastinal or hilar nodes seen. Tiny right calcified nodes are present. Mediastinal vasculature enhance normally. Heart size is not enlarged. No pericardial or pleural effusion is seen. ABDOMEN ANDPELVIS No suspicious focal hepatic lesion detected. No biliary obstruction discerned. Portal and hepatic veins enhance normally. The gallbladder, spleen, pancreas, adrenals, kidneys, urinary bladder, both adnexa and uterus are unremarkable. Bilateral pelvic venous congestion is present, worse on the left. There is interval resolution of previous right corpus luteum / hemorrhagic cyst. No interval adnexal or pelvic mass is noted. The bowel shows no focal mass or abnormal thickening. No ascites, peritoneal thickening or omental caking is identified. A small bone island is noted in the right iliac bone. No destructive bony lesion is noted. CONCLUSION Since last PET-CT of Nov 2017 and CT thorax of Mar 2018, 1. Status post middle lobectomy. 2. No metastasis seen in the thorax, abdomen and pelvis. 3. Other minor findings as described. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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