# Row 5014

Visit Number: 475ef61615261fdea7b061bd3be74909a9a174acb67ecb255ea7d849b4b8bb5f

Masked\_PatientID: 5013

Order ID: 562c6bf72c4e9feb8190c02e25b171f65b34ff9e02806cc324f992ec1c78036c

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 05/3/2019 9:07

Line Num: 1

Text: HISTORY history of NPC and lymphoma now brain lesion seen on CT - possible brain mets vs primary vs lymphoma recurrence TECHNIQUE Scans of the chest abdomen pelvis were acquired after the administration of intravenous contrast medium. Intravenous contrast: Omnipaque 350 Contrast volume (ml): 80 FINDINGS Comparison made with the last CT scan of 29\5\13 and CXR 28\2\19. There are no significant enlarged supraclavicular, mediastinal, hilar and axillary lymph nodes. Heart size is normal. No pericardial effusion is seen. There is an area of patchy consolidation in the left lower lobe, image6-68. No focal nodule is seen in the rest of the left lung. No pleural effusion is seen.6-38. No consolidation, nodule or pleural effusion is seen. The liver has no focal abnormality save for a tiny low attenuation focus in segment three that is too small to characterise. The gallbladder, spleen, pancreas, adrenal glands, kidneys and visualized bowel loops in the abdomen appear unremarkable. Urinary bladder is unremarkable. Prostate shows no calcification, mildly prominent. No significantly enlarged intra-abdominal lymph node is seen. No free intraperitoneal fluid is detected. No focal bony normality is seen. CONCLUSION Left lung has an area of patchy consolidation likely due to infection. No pleural effusion is seen. Follow-up is advised. No focal liver or splenic lesion is seen. No enlarged node is seen in the abdomen and pelvis. Report Indicator: May need further action Finalised by: <DOCTOR>

Accession Number: 5b6c526bf37077fa11a74f7d5f830ab720fbcb70e11d79ed1d94f0b726840e50

Updated Date Time: 05/3/2019 10:20

## Layman Explanation

This radiology report discusses HISTORY history of NPC and lymphoma now brain lesion seen on CT - possible brain mets vs primary vs lymphoma recurrence TECHNIQUE Scans of the chest abdomen pelvis were acquired after the administration of intravenous contrast medium. Intravenous contrast: Omnipaque 350 Contrast volume (ml): 80 FINDINGS Comparison made with the last CT scan of 29\5\13 and CXR 28\2\19. There are no significant enlarged supraclavicular, mediastinal, hilar and axillary lymph nodes. Heart size is normal. No pericardial effusion is seen. There is an area of patchy consolidation in the left lower lobe, image6-68. No focal nodule is seen in the rest of the left lung. No pleural effusion is seen.6-38. No consolidation, nodule or pleural effusion is seen. The liver has no focal abnormality save for a tiny low attenuation focus in segment three that is too small to characterise. The gallbladder, spleen, pancreas, adrenal glands, kidneys and visualized bowel loops in the abdomen appear unremarkable. Urinary bladder is unremarkable. Prostate shows no calcification, mildly prominent. No significantly enlarged intra-abdominal lymph node is seen. No free intraperitoneal fluid is detected. No focal bony normality is seen. CONCLUSION Left lung has an area of patchy consolidation likely due to infection. No pleural effusion is seen. Follow-up is advised. No focal liver or splenic lesion is seen. No enlarged node is seen in the abdomen and pelvis. 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.