# Row 5800

Visit Number: 5541b328c0f9cb6caae7d8fa0734254cd3f73c36ea826230fb57bf928b4246cd

Masked\_PatientID: 5794

Order ID: 92474592c0ebe399c64c0e49c8f61acb7f2bdf16db3969ee1e4284a741622588

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 24/5/2017 18:49

Line Num: 1

Text: HISTORY follow up multiple pulmonary nodules TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS The CT scans of 25 May 2016 and 27 June 2016 were reviewed. The previously seen subcentimetre pulmonary nodules are again seen, largely unchanged in size from the prior scan: - Apical segment of the right upper lobe, 3 mm (img 5-25 vs 5-25 prior) - Anterior segment of the right upper lobe, 4 mm (image 5-47 vs 5-47 prior) - Lateral segment of the middle lobe, 5 mm (image 5-64 vs 5-64 prior) - Lateral basal segment of the right lower lobe, 3, 2 and 5 mm respectively (img 5-70, 73, 75 vs 5-70, 74, 75 prior) - Anterior segment of the left upper lobe, 3 mm (image 5-43 vs 5-45 prior) - Inferior lingula segment of the left upper lobe, 3 mm (img 5-69 vs 5-74 prior)¿ - Lateral basal segment of the left lower lobe, measuring 6 mm (img 5-70 vs 5-78 prior) The above nodules are not calcified. Nonew pulmonary nodule, mass, consolidation or pleural effusion is evident. The central airways are patent. Mild paraseptal emphysema is noted in the right lung apex. There is no enlarged supraclavicular, axillary, mediastinal or hilar lymph node. The small volume paratracheal, precarinal and prevascular lymph nodes are stable. The heart size is normal. No pericardial effusion is seen. Limited sections of the upper abdomen do not show significant abnormality. There is no destructive bone lesion. CONCLUSION The multiple subcentimetre pulmonary nodules in both lungs are largely unchanged since the CT scan of 27 June 2016. These remain indeterminate. No new pulmonary nodule / mass, consolidation or pleural effusion. May need further action Reported by: <DOCTOR>

Accession Number: f485085880d4df6a57f5f3b361c3b7f38f205a96f62a67acb601336d337fba64

Updated Date Time: 25/5/2017 12:38

## Layman Explanation

This radiology report discusses HISTORY follow up multiple pulmonary nodules TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS The CT scans of 25 May 2016 and 27 June 2016 were reviewed. The previously seen subcentimetre pulmonary nodules are again seen, largely unchanged in size from the prior scan: - Apical segment of the right upper lobe, 3 mm (img 5-25 vs 5-25 prior) - Anterior segment of the right upper lobe, 4 mm (image 5-47 vs 5-47 prior) - Lateral segment of the middle lobe, 5 mm (image 5-64 vs 5-64 prior) - Lateral basal segment of the right lower lobe, 3, 2 and 5 mm respectively (img 5-70, 73, 75 vs 5-70, 74, 75 prior) - Anterior segment of the left upper lobe, 3 mm (image 5-43 vs 5-45 prior) - Inferior lingula segment of the left upper lobe, 3 mm (img 5-69 vs 5-74 prior)¿ - Lateral basal segment of the left lower lobe, measuring 6 mm (img 5-70 vs 5-78 prior) The above nodules are not calcified. Nonew pulmonary nodule, mass, consolidation or pleural effusion is evident. The central airways are patent. Mild paraseptal emphysema is noted in the right lung apex. There is no enlarged supraclavicular, axillary, mediastinal or hilar lymph node. The small volume paratracheal, precarinal and prevascular lymph nodes are stable. The heart size is normal. No pericardial effusion is seen. Limited sections of the upper abdomen do not show significant abnormality. There is no destructive bone lesion. CONCLUSION The multiple subcentimetre pulmonary nodules in both lungs are largely unchanged since the CT scan of 27 June 2016. These remain indeterminate. No new pulmonary nodule / mass, consolidation or pleural effusion. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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