# Row 5956

Visit Number: c41b4bee2fd14eebbc65d1f10485aee41709d3fa313a54eab73c10d8b1a06405

Masked\_PatientID: 5956

Order ID: 30074f0224a013f01e981bf2a4cef32e6434a6dac0017380c96f50f6b45e2884

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 12/11/2016 10:57

Line Num: 1

Text: HISTORY Fever x 2/52, a/w chills and rigors for investigation tro abscess; started by GP with PO antibiotics, not resolving TECHNIQUE Scans of the thorax, abdomen and pelvis were acquired after the administration of Intravenous contrast: Omnipaque 350 - Volume (ml): 75 FINDINGS There are no prior relevant scans available for comparison. CHEST Multiple prominent and few enlarged right axillary and subpectoral lymph nodes are noted; the largest one measures upto 10 mm in short axis. No focal lesion identified in the breasts on either side. The mediastinal vessels opacify normally. No significantly enlarged mediastinal, hilar or supraclavicular lymph node is detected. The heart is normal in size. No pericardial effusion is seen. No pulmonary nodule, consolidation or ground-glass opacity is detected. No pleural effusion is present. ABDOMEN AND PELVIS The liver, gallbladder, pancreas, adrenal glands and kidneys appear unremarkable. Spleen is mildly enlarged measures up to 12 cm in craniocaudal dimensions. The uterus, ovaries, urinary bladder and bowel loops show normal features. Few prominent ileocolic, bilateral external iliac and inguinal lymph nodes are nonspecific. No significantly enlarged intra-abdominal or pelvic lymph node is seen. No free intraperitoneal fluid is detected. The bones appear unremarkable. CONCLUSION Multiple prominent and few enlarged right axillary and subpectoral lymph nodes are noted. Clinical correlation is suggested. No focal lesion identified in the breasts on either side. No evidence of intra-abdominal collection. No source of infection noted in the chest, abdomen and pelvis. May need further action Finalised by: <DOCTOR>

Accession Number: b6745af7f8f4cd11c8eabd681a463188888e1467a6401f5487f7a5bc15f23a16

Updated Date Time: 12/11/2016 11:55

## Layman Explanation

This radiology report discusses HISTORY Fever x 2/52, a/w chills and rigors for investigation tro abscess; started by GP with PO antibiotics, not resolving TECHNIQUE Scans of the thorax, abdomen and pelvis were acquired after the administration of Intravenous contrast: Omnipaque 350 - Volume (ml): 75 FINDINGS There are no prior relevant scans available for comparison. CHEST Multiple prominent and few enlarged right axillary and subpectoral lymph nodes are noted; the largest one measures upto 10 mm in short axis. No focal lesion identified in the breasts on either side. The mediastinal vessels opacify normally. No significantly enlarged mediastinal, hilar or supraclavicular lymph node is detected. The heart is normal in size. No pericardial effusion is seen. No pulmonary nodule, consolidation or ground-glass opacity is detected. No pleural effusion is present. ABDOMEN AND PELVIS The liver, gallbladder, pancreas, adrenal glands and kidneys appear unremarkable. Spleen is mildly enlarged measures up to 12 cm in craniocaudal dimensions. The uterus, ovaries, urinary bladder and bowel loops show normal features. Few prominent ileocolic, bilateral external iliac and inguinal lymph nodes are nonspecific. No significantly enlarged intra-abdominal or pelvic lymph node is seen. No free intraperitoneal fluid is detected. The bones appear unremarkable. CONCLUSION Multiple prominent and few enlarged right axillary and subpectoral lymph nodes are noted. Clinical correlation is suggested. No focal lesion identified in the breasts on either side. No evidence of intra-abdominal collection. No source of infection noted in the chest, abdomen and pelvis. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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