# Row 6107

Visit Number: c4dfbd8d69526bb082e9cf07157edc94300423e42f8abcb428dd5b7740d1c96f

Masked\_PatientID: 6107

Order ID: f1004d2f642f0d16647c08da88dcddf3767648cdcc61d5f70fc57524c0502abc

Order Name: CT Chest and Abdomen

Result Item Code: CTCHEABD

Performed Date Time: 20/7/2018 20:03

Line Num: 1

Text: HISTORY TCU Dr Ravi 2/52 on 23/7/18 trace histo OA MRI Pelvis + CT TA 1 week prior TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 80 FINDINGS No comparison CT available. The pelvis is not included in this CT. Please refer to the separately reported MRI pelvis. A small portion of the large left uterine fibroid on the MRI is partially imaged in the lower sections of the abdomen (8-77, 11-34). No suspicious focal hepatic lesion detected. Post cholecystectomy status noted. No biliary obstruction discerned. Portal and hepatic veins enhance normally. The proximal pancreas shows fatty infiltration which is normal variant. The spleen, adrenals, kidneys and the bowel in the abdomen are unremarkable apart from a few uncomplicated colonic diverticula. No enlarged abdominal nodes, ascites, peritoneal thickening or omental caking is visualised. Small fat containing umbilical hernia is seen. No enlarged supraclavicular, axillary, mediastinal or hilar nodes seen. Nonspecific bilobed left thyroid hypodensity measuring 22mm noted. Heart size is not enlarged. No pericardial or pleural effusion is seen. No lung mass or sinister nodule is noted. There are no consolidation or ground-glass changes. No interstitial fibrosis, bronchiectasis or emphysema is evident. The major airways are patent. The thoracic and abdominal aorta is of normal calibre. Thoracolumbar scoliosis andlumbar spondylosis noted. No destructive bony lesions seen. CONCLUSION 1. No metastasis seen in the thorax and abdomen. 2. Left thyroid hypodensity is nonspecific and may be evaluated on ultrasound. 3. Other minor findings as described. May need further action Finalised by: <DOCTOR>

Accession Number: d9148d90e956d50e3e18cd7d0041af26e92bc61773b990e680077910bc93f1ac

Updated Date Time: 23/7/2018 9:56

## Layman Explanation

This radiology report discusses HISTORY TCU Dr Ravi 2/52 on 23/7/18 trace histo OA MRI Pelvis + CT TA 1 week prior TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 80 FINDINGS No comparison CT available. The pelvis is not included in this CT. Please refer to the separately reported MRI pelvis. A small portion of the large left uterine fibroid on the MRI is partially imaged in the lower sections of the abdomen (8-77, 11-34). No suspicious focal hepatic lesion detected. Post cholecystectomy status noted. No biliary obstruction discerned. Portal and hepatic veins enhance normally. The proximal pancreas shows fatty infiltration which is normal variant. The spleen, adrenals, kidneys and the bowel in the abdomen are unremarkable apart from a few uncomplicated colonic diverticula. No enlarged abdominal nodes, ascites, peritoneal thickening or omental caking is visualised. Small fat containing umbilical hernia is seen. No enlarged supraclavicular, axillary, mediastinal or hilar nodes seen. Nonspecific bilobed left thyroid hypodensity measuring 22mm noted. Heart size is not enlarged. No pericardial or pleural effusion is seen. No lung mass or sinister nodule is noted. There are no consolidation or ground-glass changes. No interstitial fibrosis, bronchiectasis or emphysema is evident. The major airways are patent. The thoracic and abdominal aorta is of normal calibre. Thoracolumbar scoliosis andlumbar spondylosis noted. No destructive bony lesions seen. CONCLUSION 1. No metastasis seen in the thorax and abdomen. 2. Left thyroid hypodensity is nonspecific and may be evaluated on ultrasound. 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.