# Row 6271

Visit Number: 6f09efca05f73c94bbe7b416b671d8b3a4b79109864ee84a67e35f4ad24f46e8

Masked\_PatientID: 6267

Order ID: f368fcafee5ce31a86eb6a08a83c8f7a853a67246ed17eb0a97de9d66a2a9ddb

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 22/1/2020 13:38

Line Num: 1

Text: HISTORY Esophageal Ca, restaging TECHNIQUE Contrast-enhanced CT of the thorax, abdomen and pelvis. Intravenous contrast: Omnipaque 350 - Volume (ml): 70 FINDINGS Comparison is made with the CT of 4 December 2019 (NCC). The enlarged lymph nodes in the mediastinum and left supraclavicular region are larger. For example, the largest node now measures 3.0 x 2.9 cm (series 402 image 4). Previously, it measured 2.1 x 1.9 cm (series 5 image 24). This node is located in the left supraclavicular region. Enlarged lymph nodes in the right axilla are also larger. The largest node now measures 1.8 x 1.5 cm (series 402 image 28). Previously, it measured 9 x 9 mm (series 5 image 54). There are moderate-sized bilateral pleural effusions, larger on the right. These are newly identified. There is a subcentimetre nodule in the subpleural aspect of the upper lobe of the right lung (series 401 image 34). This could represent a pulmonary metastasis. It appears to be newly identified. There is paraseptal emphysema in the upper lobes of the lungs. In the abdomen, the liver shows new development of several small hypodense lesions, suspicious for metastases. The largest lesion measures 1.6 x 1.3 cm and is located in segment 4 (series 501 image 40). The biliary tree is not dilated. The gallbladder contains subcentimetre calculi. The splenic metastases have progressed, the largest lesion now measuring 2.0 x 1.8 cm (series 501 image 48) compared to 1.1 x 1.0 cm before (series 5 image 142). Several new subcentimetre hypodense lesions are also seen in the spleen, suspicious for metastases. The pancreas shows a well-defined hypodense lesion in its neck (series 501 image 56), probably representing a small cystic lesion of the pancreas. The main pancreatic duct is not dilated. The adrenal glands are unremarkable. The kidneys show no abnormality. There is no hydronephrosis. The bowel appears unremarkable. The urinary bladder contains a Foley catheter. It is under-distended and its wall cannot be assessed. The prostate gland is not enlarged. It shows small foci of calcification. No enlarged lymph node is seen in the retroperitoneum. There is no ascites. There are again multiple sclerotic lesions in the vertebrae, ribs, pelvic bones, proximal femora and scapulae, consistent with skeletal metastases. The skeletal metastasis to the right 4th rib shows a large surrounding soft tissue component that is larger compared to the last CT, now measuring 4.4 x 3.9 cm (series 405 image 48) compared to 3.5 x 2.8 cm before (series 300 image 63). No epidural component is identified in the vertebral metastases to suggest cord compression. CONCLUSION The enlarged lymph nodes in the mediastinum, left supraclavicular and right axillary region are larger. There are new lesions in the liver, suspicious for metastases. The splenic metastases have progressed. There is possibly a new pulmonary metastasis. The soft tissue component around the right 4th rib metastasis is larger. Report Indicator: May need further action Finalised by: <DOCTOR>

Accession Number: b435c35361fd1f1288421241d97219a3b4841e602bb36dcd2982000a07d34e4d

Updated Date Time: 22/1/2020 16:01

## Layman Explanation

This radiology report discusses HISTORY Esophageal Ca, restaging TECHNIQUE Contrast-enhanced CT of the thorax, abdomen and pelvis. Intravenous contrast: Omnipaque 350 - Volume (ml): 70 FINDINGS Comparison is made with the CT of 4 December 2019 (NCC). The enlarged lymph nodes in the mediastinum and left supraclavicular region are larger. For example, the largest node now measures 3.0 x 2.9 cm (series 402 image 4). Previously, it measured 2.1 x 1.9 cm (series 5 image 24). This node is located in the left supraclavicular region. Enlarged lymph nodes in the right axilla are also larger. The largest node now measures 1.8 x 1.5 cm (series 402 image 28). Previously, it measured 9 x 9 mm (series 5 image 54). There are moderate-sized bilateral pleural effusions, larger on the right. These are newly identified. There is a subcentimetre nodule in the subpleural aspect of the upper lobe of the right lung (series 401 image 34). This could represent a pulmonary metastasis. It appears to be newly identified. There is paraseptal emphysema in the upper lobes of the lungs. In the abdomen, the liver shows new development of several small hypodense lesions, suspicious for metastases. The largest lesion measures 1.6 x 1.3 cm and is located in segment 4 (series 501 image 40). The biliary tree is not dilated. The gallbladder contains subcentimetre calculi. The splenic metastases have progressed, the largest lesion now measuring 2.0 x 1.8 cm (series 501 image 48) compared to 1.1 x 1.0 cm before (series 5 image 142). Several new subcentimetre hypodense lesions are also seen in the spleen, suspicious for metastases. The pancreas shows a well-defined hypodense lesion in its neck (series 501 image 56), probably representing a small cystic lesion of the pancreas. The main pancreatic duct is not dilated. The adrenal glands are unremarkable. The kidneys show no abnormality. There is no hydronephrosis. The bowel appears unremarkable. The urinary bladder contains a Foley catheter. It is under-distended and its wall cannot be assessed. The prostate gland is not enlarged. It shows small foci of calcification. No enlarged lymph node is seen in the retroperitoneum. There is no ascites. There are again multiple sclerotic lesions in the vertebrae, ribs, pelvic bones, proximal femora and scapulae, consistent with skeletal metastases. The skeletal metastasis to the right 4th rib shows a large surrounding soft tissue component that is larger compared to the last CT, now measuring 4.4 x 3.9 cm (series 405 image 48) compared to 3.5 x 2.8 cm before (series 300 image 63). No epidural component is identified in the vertebral metastases to suggest cord compression. CONCLUSION The enlarged lymph nodes in the mediastinum, left supraclavicular and right axillary region are larger. There are new lesions in the liver, suspicious for metastases. The splenic metastases have progressed. There is possibly a new pulmonary metastasis. The soft tissue component around the right 4th rib metastasis is larger. 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.