# Row 6587

Visit Number: cadb09260064c3a4102b5a85f23b58eef7656d639d38e369bbf3b3730328b346

Masked\_PatientID: 6580

Order ID: 550dbaf26e567c538d0b0dca5ddd068c48eb422b0b1e652c715d3d8e85cd1ae3

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 08/8/2018 14:48

Line Num: 1

Text: HISTORY chronic cough with background R lower lobe mucinous adenoCA TRO recurrence TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Nil (due to the patient’s poor renal function) FINDINGS Comparison is made with the CT thorax dated 31/01/2018. Status post right lower lobectomy. There has been interval development of patchy ground-glass changes in the right upper lobe, middle lobe and left lower lobe, associated with a few scattered centrilobular ground-glass nodules (for example on the right 201-54). A 0.3 cm perifissural nodule is seen in the middle lobe (201-35). There is a small focal area of consolidation in the medial segment of the middle lobe (201-60). No dominant pulmonary mass is seen. No pleural effusion is present. Small volume mediastinal nodes are likely reactive. No enlarged mediastinal, hilar, axillary or supraclavicular nodes are seen within the limits of this non-contrast study. Tip of the AICD lead is in the right ventricle. Coronary artery bypass grafts, with stenotomy wires and mediastinal clips noted. The heart is mildly enlarged. No pericardial effusion seen. Small stones are again noted in the distal common bile duct and gallbladder. The biliary tree is not dilated. There is cortical scarring of the right kidney. A few uncomplicated colonic diverticula are noted. No destructive bony lesion is seen. CONCLUSION 1. Status post right lower lobectomy. No new dominant pulmonary mass seen to suggest local recurrence. 2. New foci of ground glass changes in the right upper lobe, middle lobe and left lower lobe and focal consolidation in the middle lobe, are likely related to infective/inflammatory changes,in the given clinical context. May need further action Reported by: <DOCTOR>

Accession Number: 8fa72cb01b30eb5e11fdecd9753e471fc922b29b633275f0215bc4f300c4b76b

Updated Date Time: 08/8/2018 15:43

## Layman Explanation

This radiology report discusses HISTORY chronic cough with background R lower lobe mucinous adenoCA TRO recurrence TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Nil (due to the patient’s poor renal function) FINDINGS Comparison is made with the CT thorax dated 31/01/2018. Status post right lower lobectomy. There has been interval development of patchy ground-glass changes in the right upper lobe, middle lobe and left lower lobe, associated with a few scattered centrilobular ground-glass nodules (for example on the right 201-54). A 0.3 cm perifissural nodule is seen in the middle lobe (201-35). There is a small focal area of consolidation in the medial segment of the middle lobe (201-60). No dominant pulmonary mass is seen. No pleural effusion is present. Small volume mediastinal nodes are likely reactive. No enlarged mediastinal, hilar, axillary or supraclavicular nodes are seen within the limits of this non-contrast study. Tip of the AICD lead is in the right ventricle. Coronary artery bypass grafts, with stenotomy wires and mediastinal clips noted. The heart is mildly enlarged. No pericardial effusion seen. Small stones are again noted in the distal common bile duct and gallbladder. The biliary tree is not dilated. There is cortical scarring of the right kidney. A few uncomplicated colonic diverticula are noted. No destructive bony lesion is seen. CONCLUSION 1. Status post right lower lobectomy. No new dominant pulmonary mass seen to suggest local recurrence. 2. New foci of ground glass changes in the right upper lobe, middle lobe and left lower lobe and focal consolidation in the middle lobe, are likely related to infective/inflammatory changes,in the given clinical context. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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