# Row 6749

Visit Number: 07f706ab6c13a7e8efdb9640734ecae3506ee1c2d31f882ab33d0502e8ced6d8

Masked\_PatientID: 6749

Order ID: a3f9d5fe509eef764345d84a4f01bc6c0e8a856f158a353d552c3def5bfb0cd9

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 22/12/2017 17:39

Line Num: 1

Text: HISTORY bilateral pleural effusions Left larger than right Non-resolving despite multiple courses of abx TECHNIQUE Contrast enhanced scans of the thorax. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS Note is made of the chest radiographs of 20 and 22 December 2017. Bilateral low density pleural effusions are present, larger on the right where there is mild compressive atelectasis of the right lower lobe. No overt pleural thickening or nodularityis detected. No suspicious pulmonary nodule, mass or consolidation is seen. The central airways are patent. No significantly enlarged mediastinal, hilar, axillary or supraclavicular lymph node is detected. The major mediastinal vessels demonstrate grossly normal opacification. Coronary artery calcification is present. Heart size is normal. No pericardial effusion is seen. The limited sections of the upper abdomen appear grossly unremarkable. No destructive bone lesion is seen. CONCLUSION Bilateral pleural effusions, larger on the right. No overt pleural thickening or underlying lung consolidation detected. Known / Minor Finalised by: <DOCTOR>

Accession Number: 347f881f19f3a4969604c2002d574d08e3a85755cc1cb099a09062a1b053874f

Updated Date Time: 23/12/2017 8:57

## Layman Explanation

This radiology report discusses HISTORY bilateral pleural effusions Left larger than right Non-resolving despite multiple courses of abx TECHNIQUE Contrast enhanced scans of the thorax. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS Note is made of the chest radiographs of 20 and 22 December 2017. Bilateral low density pleural effusions are present, larger on the right where there is mild compressive atelectasis of the right lower lobe. No overt pleural thickening or nodularityis detected. No suspicious pulmonary nodule, mass or consolidation is seen. The central airways are patent. No significantly enlarged mediastinal, hilar, axillary or supraclavicular lymph node is detected. The major mediastinal vessels demonstrate grossly normal opacification. Coronary artery calcification is present. Heart size is normal. No pericardial effusion is seen. The limited sections of the upper abdomen appear grossly unremarkable. No destructive bone lesion is seen. CONCLUSION Bilateral pleural effusions, larger on the right. No overt pleural thickening or underlying lung consolidation detected. Known / Minor Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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