# Row 7420

Visit Number: 7a6e14b3ccc25f46c1738d9beb82637ffc6fa3a6622b2f76481159ef6bbf06d8

Masked\_PatientID: 7412

Order ID: 9345728be6c0c6117d7c1c03e31264f98125b049d6dc4ff1a952254309578390

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 23/6/2017 16:01

Line Num: 1

Text: HISTORY to look for mediastinitis/collections MRSA sternal wound infection TECHNIQUE Contrast-enhanced CT of the thorax. 50 ml of iodinated contrast material (Iopamiro 370) was administered intravenously. FINDINGS Comparison is made with the CT of 24 May 2017. There is a 1.4 x 1.1 cm fluid collection in the anterior mediastinum (series 3 image 42). This appears smaller compared to before and there is no gas or rim-enhancement to suggest super-imposed infection. Previously, it measured 1.6 x 1.5 cm (series 3 image 41). There are erosions in the manubrium sternum adjacent to the sternotomy wound, suspicious for osteomyelitis. These are newly identified. The lungs show mild-to-moderate centrilobular emphysema, worse in the right upper lobe. There is mild atelectasis/ scarring in the left lingula. No pleural or pericardial effusion is seen. The previously noted bilateral pleural effusions have resolved. Limited sections of the upper abdomen are unremarkable. CONCLUSION There is a small fluid collection in the anterior mediastinum which is smaller compared to the last CT. It shows no gas or rim-enhancement to suggest superimposed infection. There are erosions in themanubrium sternum, suspicious for osteomyelitis. This is newly identified. May need further action Finalised by: <DOCTOR>

Accession Number: 822f748a2b6b136eb169ba8f232206c87af172f684fc22093378ced192d867fb

Updated Date Time: 23/6/2017 17:05

## Layman Explanation

This radiology report discusses HISTORY to look for mediastinitis/collections MRSA sternal wound infection TECHNIQUE Contrast-enhanced CT of the thorax. 50 ml of iodinated contrast material (Iopamiro 370) was administered intravenously. FINDINGS Comparison is made with the CT of 24 May 2017. There is a 1.4 x 1.1 cm fluid collection in the anterior mediastinum (series 3 image 42). This appears smaller compared to before and there is no gas or rim-enhancement to suggest super-imposed infection. Previously, it measured 1.6 x 1.5 cm (series 3 image 41). There are erosions in the manubrium sternum adjacent to the sternotomy wound, suspicious for osteomyelitis. These are newly identified. The lungs show mild-to-moderate centrilobular emphysema, worse in the right upper lobe. There is mild atelectasis/ scarring in the left lingula. No pleural or pericardial effusion is seen. The previously noted bilateral pleural effusions have resolved. Limited sections of the upper abdomen are unremarkable. CONCLUSION There is a small fluid collection in the anterior mediastinum which is smaller compared to the last CT. It shows no gas or rim-enhancement to suggest superimposed infection. There are erosions in themanubrium sternum, suspicious for osteomyelitis. This is newly identified. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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