# Row 7963

Visit Number: a892f202d1383136e32144861395f2b5c77db4a63b580d6016e247466ac4d68a

Masked\_PatientID: 7961

Order ID: 80e04869518f6b0812e1e524473b7ff51c5e87c348e10991703c1a0d089ea2e5

Order Name: CT Chest, High Resolution

Result Item Code: CTCHEHR

Performed Date Time: 30/6/2016 13:10

Line Num: 1

Text: HISTORY Cough and SoB with Fever ; B/g NSIP on steroids B/g Liver Transplant receipient - on immunosuppresants CXR worsening - to rule out progression of NSIP vs TB REPORT Non-contrast CT of the thorax. Comparison is made with the CT dated 24/03/2016. There is new development of ground glass opacities and air-space consolidation in the right lung, most extensive in the middle and lower lobes. Intra-lobular septal thickening is also seen. These findings are probablyinfective in aetiology. The severe interstitial lung disease is unchanged. ‘Honeycombing’ is present, most extensive in the lower lobes. No pleural or pericardial effusion is detected. There is no enlarged lymph node. The limited images of the upper abdomen again show the transplanted liver. The right branch of the portal vein is again noted to be dilated. No destructive bone lesion is seen. CONCLUSION There are ground-glass opacities and small patches of air-space consolidation in the right lung, probably infective in aetiology. The changes consistent with interstitial lung disease (NSIP vs UIP), are stable compared to the CT of 24 Mar 2016. May need further action Reported by: <DOCTOR>

Accession Number: a48f4cfffd5cab0d8e06cc839701ad2904d41994986d3f9206c3926ff722ad64

Updated Date Time: 30/6/2016 15:49

## Layman Explanation

This radiology report discusses HISTORY Cough and SoB with Fever ; B/g NSIP on steroids B/g Liver Transplant receipient - on immunosuppresants CXR worsening - to rule out progression of NSIP vs TB REPORT Non-contrast CT of the thorax. Comparison is made with the CT dated 24/03/2016. There is new development of ground glass opacities and air-space consolidation in the right lung, most extensive in the middle and lower lobes. Intra-lobular septal thickening is also seen. These findings are probablyinfective in aetiology. The severe interstitial lung disease is unchanged. ‘Honeycombing’ is present, most extensive in the lower lobes. No pleural or pericardial effusion is detected. There is no enlarged lymph node. The limited images of the upper abdomen again show the transplanted liver. The right branch of the portal vein is again noted to be dilated. No destructive bone lesion is seen. CONCLUSION There are ground-glass opacities and small patches of air-space consolidation in the right lung, probably infective in aetiology. The changes consistent with interstitial lung disease (NSIP vs UIP), are stable compared to the CT of 24 Mar 2016. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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