# Row 8125

Visit Number: e2238995e265a1de8492b65d0d987af9c1fb5184db2df40fef00925208762e05

Masked\_PatientID: 8122

Order ID: d87d3820347ab534bfe052c2f34478be3225f7dc1e9e1189d9a0879991597fa2

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 23/10/2019 9:53

Line Num: 5

Text: within normal limits and there is no pericardial effusion. The visualised abdominal viscera are unremarkable apart from the known mild gallbladder mural oedema and tiny hepatic hypodensities. A partially visualised nasogastric tube is seen with its tip projected within the body of the stomach. Surgical anastomotic sutures are seen within the left upper quadrant in keeping with recent left colectomy. Degenerative change of the visualised spine is seen. There is no bony erosion. CONCLUSION 1. Patchy consolidative change in the base of the right lung with fluid noted within the right lower lobe bronchus and bronchioles are suggestive of underlying infection. Aspiration has to be considered. 2. A spiculated mass-like lesion in the left lower lobe with attachment to the underlying pleura is indeterminate for consolidation versus malignancy. Suggest interval follow-up after appropriate treatment course for re-evaluation. 3. Bilateral small pleural effusions. 4. No significant hilar, mediastinal or axillary lymphadenopathy. Dr Nicole Ng was informed of the above findings and the recommendation for physiotherapy input on 23 October 2019, 1200 hours. Readback performed. Report Indicator: May need further action Reported by: <DOCTOR>

Accession Number: 39200f91d5237b6d92b023bc3dffcf30ed2dea1ead073ba0dde7aa14e09ba77d

Updated Date Time: 23/10/2019 12:42

## Layman Explanation

This radiology report discusses within normal limits and there is no pericardial effusion. The visualised abdominal viscera are unremarkable apart from the known mild gallbladder mural oedema and tiny hepatic hypodensities. A partially visualised nasogastric tube is seen with its tip projected within the body of the stomach. Surgical anastomotic sutures are seen within the left upper quadrant in keeping with recent left colectomy. Degenerative change of the visualised spine is seen. There is no bony erosion. CONCLUSION 1. Patchy consolidative change in the base of the right lung with fluid noted within the right lower lobe bronchus and bronchioles are suggestive of underlying infection. Aspiration has to be considered. 2. A spiculated mass-like lesion in the left lower lobe with attachment to the underlying pleura is indeterminate for consolidation versus malignancy. Suggest interval follow-up after appropriate treatment course for re-evaluation. 3. Bilateral small pleural effusions. 4. No significant hilar, mediastinal or axillary lymphadenopathy. Dr Nicole Ng was informed of the above findings and the recommendation for physiotherapy input on 23 October 2019, 1200 hours. Readback performed. Report Indicator: May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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