# Row 8586

Visit Number: cd21b7eff3791dd22292a7bae5750a8552c35755544708c152099922877e998c

Masked\_PatientID: 8586

Order ID: a9cad2ea22482b3d94ad3949e87e71e30269d380483b5c5e133b3001448945f4

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 28/1/2019 16:23

Line Num: 1

Text: HISTORY encephalitis patent. came with AMS. need to rule out underlying malignany ? paraneoplasitc encephalitis TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: FINDINGS There is image blurring dueto motion. Posterior bowing of the trachea and main bronchi suggest scan was performed in expiration. There is marked narrowing of the right main bronchus, bronchus intermedius suggestive of bronchomalacia. No suspicious pulmonary nodule, or consolidation is seen in the lungs. Linear atelectasis seen in the anterior left upper lobe. Within limits of this unenhanced scan there is no significant enlarged mediastinal, hilar, supraclavicular or axillary lymph node. Heart is not enlarged. There is no pericardial or pleural effusion. A subcentimetre hypodensity in segment IVA of the liver is nonspecific. Multiple small calcified gallstones are noted in the thin walled gallbladder. The unenhanced pancreas, spleen, adrenal glands are grossly unremarkable. Focal scarring is seen in the right kidney. Small exophytic hyperdense lesion at the left upper pole is too small to characterise but could represent a complicated cyst. There is no hydronephrosis. Bilateral symmetrical perinephric fluid stranding is nonspecific. There is The bowel loops are normal in calibre. There are multiple uncomplicated colonic diverticula. There is no enlarged abdominal or pelvic lymph node. There is no ascites. Prostate gland is enlarged, indenting on the bladder base. Metallic density in the prostate gland is due to previous gold seed insertion. Partially distended urinary bladder is grossly unremarkable. There is no destructive bony lesion. There are bilateral L5 pars defects CONCLUSION No suspicious mass or adenopathy detected in the thorax, abdomen or pelvis. Minor findings as above. Known / Minor Finalised by: <DOCTOR>

Accession Number: 926dafb2c25cf4bf3ec2f6c9b87cde058e21a017f76d325068d26cfaccb3ebe7

Updated Date Time: 28/1/2019 17:14

## Layman Explanation

This radiology report discusses HISTORY encephalitis patent. came with AMS. need to rule out underlying malignany ? paraneoplasitc encephalitis TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: FINDINGS There is image blurring dueto motion. Posterior bowing of the trachea and main bronchi suggest scan was performed in expiration. There is marked narrowing of the right main bronchus, bronchus intermedius suggestive of bronchomalacia. No suspicious pulmonary nodule, or consolidation is seen in the lungs. Linear atelectasis seen in the anterior left upper lobe. Within limits of this unenhanced scan there is no significant enlarged mediastinal, hilar, supraclavicular or axillary lymph node. Heart is not enlarged. There is no pericardial or pleural effusion. A subcentimetre hypodensity in segment IVA of the liver is nonspecific. Multiple small calcified gallstones are noted in the thin walled gallbladder. The unenhanced pancreas, spleen, adrenal glands are grossly unremarkable. Focal scarring is seen in the right kidney. Small exophytic hyperdense lesion at the left upper pole is too small to characterise but could represent a complicated cyst. There is no hydronephrosis. Bilateral symmetrical perinephric fluid stranding is nonspecific. There is The bowel loops are normal in calibre. There are multiple uncomplicated colonic diverticula. There is no enlarged abdominal or pelvic lymph node. There is no ascites. Prostate gland is enlarged, indenting on the bladder base. Metallic density in the prostate gland is due to previous gold seed insertion. Partially distended urinary bladder is grossly unremarkable. There is no destructive bony lesion. There are bilateral L5 pars defects CONCLUSION No suspicious mass or adenopathy detected in the thorax, abdomen or pelvis. Minor findings as above. Known / Minor Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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