# Row 8759

Visit Number: c97a659d3c1ea2d3ffde2623e074de3685fb2584608472a046f2dad5281650e9

Masked\_PatientID: 8735

Order ID: ba3ff4c0e3e3bdb42d326c47d2e0f1a2258cd3e220e51b816931268c7a031728

Order Name: CT Chest and Abdomen

Result Item Code: CTCHEABD

Performed Date Time: 02/7/2018 9:27

Line Num: 1

Text: HISTORY AML s/p allogenic stem cell transplant cx by GVHD presumed invasive fungal infection (lung + CNS involvement) recurrent E.coli bactreemia with multiple liver abscess to reassess TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: - Volume (ml): FINDINGS Comparison is made previous CT of June 2018. Most of the preexisting areas of nodules and consolidation in both lungs are stable other than progression in the focus in the inferiorlingular segment now measuring 1.4cm from previous 0.7 cm and a few new tiny subcentimetre nodular densities best seen in series 401 image 11 and 18 in the right upper lobe, series 401 image 42 in apical right lower lobe and two in right lower lobe series 401 images 72, 83. This likely due to fungal infection. No enlarged hilar or mediastinal lymph nodes, pleural effusion. Moderate pericardial effusion is largely stable. The liver and spleen appear larger than on the previousCT. A tiny subcapsular hypodensity in the periphery of segment VIII of the liver is too small to characterise stable or slightly less conspicuous than before. No other focal liver mass is detected. But there is also new periportal oedema. There is some pericholecystic oedema around the otherwise contracted gallbladder that is packed with numerous stones. The biliary tracts are not dilated. The pancreas, adrenals and both kidneys are unremarkable. No enlarged para-aortic nodes or ascites is noted. Bone settings show no destructive lesion. CONCLUSION There is persistent disease in the lungs likely due to fungal infection with a few new / enlarging foci. There is increased hepatosplenomegaly from previous CT with periportal oedema. A tiny subcapsular hypodensity in segment VIII of the liver is too small to characterise, stable or even less conspicuous from prior CT. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 55ad635b12e54ba26f83a78d6b130567de42754d21932bdda82ef188a8a97432

Updated Date Time: 02/7/2018 10:40

## Layman Explanation

This radiology report discusses HISTORY AML s/p allogenic stem cell transplant cx by GVHD presumed invasive fungal infection (lung + CNS involvement) recurrent E.coli bactreemia with multiple liver abscess to reassess TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: - Volume (ml): FINDINGS Comparison is made previous CT of June 2018. Most of the preexisting areas of nodules and consolidation in both lungs are stable other than progression in the focus in the inferiorlingular segment now measuring 1.4cm from previous 0.7 cm and a few new tiny subcentimetre nodular densities best seen in series 401 image 11 and 18 in the right upper lobe, series 401 image 42 in apical right lower lobe and two in right lower lobe series 401 images 72, 83. This likely due to fungal infection. No enlarged hilar or mediastinal lymph nodes, pleural effusion. Moderate pericardial effusion is largely stable. The liver and spleen appear larger than on the previousCT. A tiny subcapsular hypodensity in the periphery of segment VIII of the liver is too small to characterise stable or slightly less conspicuous than before. No other focal liver mass is detected. But there is also new periportal oedema. There is some pericholecystic oedema around the otherwise contracted gallbladder that is packed with numerous stones. The biliary tracts are not dilated. The pancreas, adrenals and both kidneys are unremarkable. No enlarged para-aortic nodes or ascites is noted. Bone settings show no destructive lesion. CONCLUSION There is persistent disease in the lungs likely due to fungal infection with a few new / enlarging foci. There is increased hepatosplenomegaly from previous CT with periportal oedema. A tiny subcapsular hypodensity in segment VIII of the liver is too small to characterise, stable or even less conspicuous from prior CT. Further action or early intervention required Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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