# Row 8739

Visit Number: 0f130a23e896c427e8de0522255bc25e4937744e30b816f2afc3d6d4f89ba2a6

Masked\_PatientID: 8735

Order ID: 3da89645c751e3c3b74f925fe6b6af4ffd302f232c54ef0f69dff561d7ec8bd9

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 27/2/2018 18:52

Line Num: 1

Text: HISTORY prolonged neutropenic currently adm for sepsis unknown source TECHNIQUE Contrast enhanced CT images of the thorax, abdomen and pelvis are obtained following administration of 70 ml of Omnipaque 350 intravenously. FINDINGS Comparison made with CT abdomen of 5/11/2013. No comparison CT thorax or pelvis noted. ABDOMEN AND PELVIS No suspicious solid hepatic lesion or liver abscess is seen. Tiny hypodensity in hepatic segment VIII is too small to characterise. There is uncomplicated cholelithiasis. The contracted gallbladder shows mild submucosal oedema with no adjacent fat stranding. The biliary tree is not dilated and shows no calcified biliary stones. The pancreas, spleen, adrenals, kidneys, ovaries and uterus are unremarkable. There is no hydronephrosis. Several calcifications noted along the left gonadal vessels are noted to be outside of the left upper ureter on the delayed scan seen. A small amount of densities in the right urinary bladder and not seen in the virtual non-contrast images are likely due to early filling of excreted contrast from the right ureter. Bowel shows no focal mass or abnormal thickening. In particularly, there is no thickening of the cecum, appendix or terminal ileum. An uncomplicated diverticulum is noted at the lateral aspect of the caecum. No enlarged nodes, free intraperitoneal fluid or gas. THORAX AND BONES No suspicious pulmonary nodule or focal consolidation is detected. A 0.3 cm calcified granuloma in the lateral basal segment of the right lower lobe (6-59). There are no consolidation or ground-glass changes. Interstitial thickening in bilateral lung apices may related to mild pulmonary venous congestion. Bibasal dependent atelectasis is minimal with sliver of pleural effusions. No pericardial effusion is seen. The heart is not overtly enlarged. No enlarged mediastinal or hilar lymph node. Mild degenerative changes are noted in the thoracolumbar spine. There is mild anterolisthesis of L4 over L5. No destructive bony lesion is seen. CONCLUSION 1. No obvious focus of inflammation in the thorax, abdomen and pelvis. In particularly, no collection or typhilitis noted. 2. Uncomplicated gallstones. 3. Other minor findings as described. Known / Minor Reported by: <DOCTOR>

Accession Number: b6cd4f5fa2d0dcbcc56eb55a7795fc78c3de7c1ba51485199234ded8e7d70139

Updated Date Time: 28/2/2018 15:38

## Layman Explanation

This radiology report discusses HISTORY prolonged neutropenic currently adm for sepsis unknown source TECHNIQUE Contrast enhanced CT images of the thorax, abdomen and pelvis are obtained following administration of 70 ml of Omnipaque 350 intravenously. FINDINGS Comparison made with CT abdomen of 5/11/2013. No comparison CT thorax or pelvis noted. ABDOMEN AND PELVIS No suspicious solid hepatic lesion or liver abscess is seen. Tiny hypodensity in hepatic segment VIII is too small to characterise. There is uncomplicated cholelithiasis. The contracted gallbladder shows mild submucosal oedema with no adjacent fat stranding. The biliary tree is not dilated and shows no calcified biliary stones. The pancreas, spleen, adrenals, kidneys, ovaries and uterus are unremarkable. There is no hydronephrosis. Several calcifications noted along the left gonadal vessels are noted to be outside of the left upper ureter on the delayed scan seen. A small amount of densities in the right urinary bladder and not seen in the virtual non-contrast images are likely due to early filling of excreted contrast from the right ureter. Bowel shows no focal mass or abnormal thickening. In particularly, there is no thickening of the cecum, appendix or terminal ileum. An uncomplicated diverticulum is noted at the lateral aspect of the caecum. No enlarged nodes, free intraperitoneal fluid or gas. THORAX AND BONES No suspicious pulmonary nodule or focal consolidation is detected. A 0.3 cm calcified granuloma in the lateral basal segment of the right lower lobe (6-59). There are no consolidation or ground-glass changes. Interstitial thickening in bilateral lung apices may related to mild pulmonary venous congestion. Bibasal dependent atelectasis is minimal with sliver of pleural effusions. No pericardial effusion is seen. The heart is not overtly enlarged. No enlarged mediastinal or hilar lymph node. Mild degenerative changes are noted in the thoracolumbar spine. There is mild anterolisthesis of L4 over L5. No destructive bony lesion is seen. CONCLUSION 1. No obvious focus of inflammation in the thorax, abdomen and pelvis. In particularly, no collection or typhilitis noted. 2. Uncomplicated gallstones. 3. Other minor findings as described. Known / Minor Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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