# Row 8846

Visit Number: ecee56d16cd622e41bb4013edd75d4f54715618f851d3645cf26b0daf17accae

Masked\_PatientID: 8832

Order ID: a0c64400c24716190ae5a853957b370e1ff8174c8fb3da3a0e5ad6b45e9bbce4

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 27/3/2019 9:01

Line Num: 1

Text: HISTORY pulmonary sarcoidosis. interval review TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS Previous CT chest dated 2 February 2017 was reviewed. New scarring associated with traction bronchiectasis, adjacent ground-glass changes and volume loss in the medial segment of the middle lobe (4\64), anterior segment of the left upper lobe (4\38-44) and lingula (4\64). There is superimposed consolidation in the anterior segment of the left upper lobe. Other scattered patchy areas of mild scarring in the basal segments of both lower lobes, for e.g. 4\76, 4\82, 4\88). Stable biapical scarring with adjacent pleural thickening. Subcentimetre right upper lobe perifissural nodules (4\46) and middle lobe peribronchial nodules (4\59, 4\61) are noted. Trachea and central airways are patent. Again there are multiple enlarged mediastinal and bilateral hilar nodes demonstrating foci of coarse calcifications, grossly unchanged in extent. Heart size is normal. Mediastinal structures opacify satisfactorily. No pericardial or pleural effusion. Imaged thyroid gland is unremarkable. Limited sections of the upper abdomen are grossly unremarkable. There is no destructive bony lesion. CONCLUSION Since CT dated 2 Feb 2017: 1. New scarring associated with traction bronchiectasis, ground-glass change and volume loss worst in the middle lobe and lingula. There are also small right perifissural and peribronchial nodules as described. Overall findings may reflect changes related to pulmonary sarcoidosis, with evidence of fibrosis. 2. Superimposed consolidation in the left upper lobe. Please correlate for relevant infective symptoms. 3. Stable symmetrical mediastinal and hilar lymphadenopathy with calcifications. Report Indicator: May need further action Finalised by: <DOCTOR>

Accession Number: a8f54e39a5d5e68b5563548c32a21c63b7c5e5f05d84f60407741a5b59753b1c

Updated Date Time: 01/4/2019 17:25

## Layman Explanation

This radiology report discusses HISTORY pulmonary sarcoidosis. interval review TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS Previous CT chest dated 2 February 2017 was reviewed. New scarring associated with traction bronchiectasis, adjacent ground-glass changes and volume loss in the medial segment of the middle lobe (4\64), anterior segment of the left upper lobe (4\38-44) and lingula (4\64). There is superimposed consolidation in the anterior segment of the left upper lobe. Other scattered patchy areas of mild scarring in the basal segments of both lower lobes, for e.g. 4\76, 4\82, 4\88). Stable biapical scarring with adjacent pleural thickening. Subcentimetre right upper lobe perifissural nodules (4\46) and middle lobe peribronchial nodules (4\59, 4\61) are noted. Trachea and central airways are patent. Again there are multiple enlarged mediastinal and bilateral hilar nodes demonstrating foci of coarse calcifications, grossly unchanged in extent. Heart size is normal. Mediastinal structures opacify satisfactorily. No pericardial or pleural effusion. Imaged thyroid gland is unremarkable. Limited sections of the upper abdomen are grossly unremarkable. There is no destructive bony lesion. CONCLUSION Since CT dated 2 Feb 2017: 1. New scarring associated with traction bronchiectasis, ground-glass change and volume loss worst in the middle lobe and lingula. There are also small right perifissural and peribronchial nodules as described. Overall findings may reflect changes related to pulmonary sarcoidosis, with evidence of fibrosis. 2. Superimposed consolidation in the left upper lobe. Please correlate for relevant infective symptoms. 3. Stable symmetrical mediastinal and hilar lymphadenopathy with calcifications. Report Indicator: May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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