# Row 9696

Visit Number: fb3a8a957354794f7c65a45c1a727373eeabaf7d5b284d5ef8d18a2a6a50d135

Masked\_PatientID: 9694

Order ID: c2acd67d6a8616de965a50a36432d23d9913aba2d94ee10d9ff455e4cfd982ea

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 24/10/2015 17:03

Line Num: 1

Text: HISTORY Chronic cough and LOW, suspected malignancy TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS No prior CT examination available for comparison. There are minor dependent changes in the lungs bilaterally. No focal suspicious pulmonary nodule or consolidation is seen. There is no significant dilatation of the bronchial tree, and the proximal airways are patent. No enlarged intrathoracic, supraclavicular or axillary lymph node is present. There is sliver of pleural effusion on the right side is noted. In the visualised upper abdomen, several small subcentimetre hypodensities are seen in both lobes of the liver which are too small to characterise. There is mild nodular thickening of the genu of left adrenal gland which is nonspecific. There are mildly displaced fractures of the right 8th to 11th ribs. Degenerative changes are noted in the visualised thoracic and upper lumbar spine with mild scoliosis. CONCLUSION No suspicious intrathoracic lesion is seen. Sliver of right pleural effusion. Small subcentimetre hepatic hypodensities are too small to characterise. Mildly displaced fractures of the right 8th to 11th ribs. May need further action Finalised by: <DOCTOR>

Accession Number: fab22ded1a9ce7d6e7ab607122a1ab6d4168006822c46e0d83274ab0c16c7db4

Updated Date Time: 25/10/2015 12:00