# Row 9893

Visit Number: 0e999e925cc0d0d976dee4c888335bb367e379b8283c93e748a3febb4eaed7bf

Masked\_PatientID: 9886

Order ID: 0808bbeba44d635625c43b36dd1f358eae4d5bce14e3f4bac4020508e32d3ed3

Order Name: CT Pulmonary Angiogram

Result Item Code: CTCHEPE

Performed Date Time: 27/7/2015 11:54

Line Num: 1

Text: HISTORY persistent SOB despite draining of pleural effusion. Was on megestrol TRO PE TECHNIQUE Contrast-enhanced CT of the thorax in the pulmonary angiographic phase. Intravenous contrast: Omnipaque 350 - Volume (ml): 60 FINDINGS Comparison is made with the CT of 10 June 2015 done at NCC. No filling defect is seen in the pulmonary artery and its branches to suggest a pulmonary embolism. Compared to the last CT, there is now a large loculated left pleural effusion. A small loculated right pleural effusion is also seen. There is again abnormal thickening and enhancement of the right sided pleura. The small pocket of gas in the right pleural cavity seen on the last CT has resolved. There is new development of air-space consolidation in the right lower lobe. The multiple pulmonary nodules are larger. For example, the largest nodule now measures 2.3 x 2.2 cm (series 5 image 35) compared to 2.1 x 1.8 cm before (series 4 image 63). There are again thickened interlobular septa in the right lung, raising the possibility of lymphangitis carcinomatosa. There are enlarged lymph nodes in the mediastinum, not significantly changed in size compared to the last CT. The largest nodemeasures 1.4 x 1.3 cm and is located in the right lower paratracheal region (series 4 image 35). Limited sections of the upper abdomen show several well-defined hypodense lesions in the liver, consistent with cysts. There is also an ill-defined hypodense lesion in the liver that is suspicious for a metastasis. It is larger than on the last CT, measuring 2.9 x 2.8 cm now (series 4 image 92) compared to 1.9 x 1.8 cm before (series 2 image 67). There is also a left hydronephrosis that is partially imaged. This appears unchanged. No skeletal metastasis is identified. CONCLUSION No pulmonary embolism is detected. Compared to the CT of 10 June 2015, there is new development of air-space consolidation in the right lung, possibly representing a pneumonia. The pulmonary metastases are larger, consistent with progression of metastatic disease. Suspicion of lymphangitis carcinomatosa in the right lung. There is now a large loculated left pleural effusion. The loculated right pleural effusion is larger. May need further action Finalised by: <DOCTOR>

Accession Number: 0b5e39f00cf6c95b2e6d0835c18fdfab07d3165db94e144fdbf8c245bce7233c

Updated Date Time: 27/7/2015 12:30