# Row 9900

Visit Number: 9777a634da404d979f94ea47f14c40c586dc76e72c41b2e5c653adf1548c860b

Masked\_PatientID: 9896

Order ID: 2a12a51c91633d822cb61234b8b5ddd66f8bb0a3d0b1384844073b03d2937c94

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 11/10/2018 11:39

Line Num: 1

Text: HISTORY NK Tcell lymphoma s/p multiple line of chemo s/p#1 pembro few days ago desaturation and fever spike overnight - to look for infective source, visceral involvement of lymphoma, to rule out PE due to immobility/malignancyTECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 75 FINDINGS PET CT from 19/07/2018 was reviewed. Motion artefacts are present. THORAX Due to motion artefacts, assessment of the smaller calibre ( eg segmental, subsegmental) pulmonary arteries is limited. No overt pulmonary embolus is detected. Previously seen mass-like consolidation in the middle lobe is stable. In the right lower lobe (6/41) there is a vague 6 mm subpleural nodule which is stable from the earlier PET CT of 31/05/2018. Minor atelectasis in the lungs. No pleural effusion. No significantly enlarged lymph node is seen. No pericardial effusion. There are few subcentimetre hypodense nodulesin the thyroid gland. These are nonspecific. Non-specific coarse right breast calcifications. The left breast is incompletely imaged but there is skin thickening at the upper half (9/1) which has increased to 6mm from prior 3 mm thickness. ABDOMEN PELVIS The spleen is now larger, measuring approximately 15.5 cm in craniocaudal length. There are also nonenhancing wedged shaped focus superiorly, in keeping with infarct. The liver, pancreas, adrenal glands and kidneys are unremarkable. Minimal gallbladder wall thickening is nonspecific. No biliary ductal dilatation. No overt lesion in the urinary bladder. No pelvic mass is seen. No enlarged lymph node. No ascites or omental caking. Bowel is normal in calibre. The appendix is not inflamed. There is no destructive bony lesion. CONCLUSION No pulmonary embolus is seen but the smaller calibre vessels cannot be assessed. New splenomegaly with new infarct superiorly. Increased skin thickening at the outer half of the left breast. The mass-like consolidation in the middle lobe of the lung is stable. May need further action Finalised by: <DOCTOR>

Accession Number: 315e09ab967f95fad0af807b2d77fc2e0226a94a061f1fb064ea3777ddec9dfa

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