# Row 9937

Visit Number: 0b2166526233fed7134cba6089fb29f004114fca55b5264ea031fc27a565efba

Masked\_PatientID: 9937

Order ID: 9dc4a6e1f0b6be5e3961ecf301fa45adc931a299cf625cc9f27f79cbe7f7b0e1

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 21/7/2019 11:48

Line Num: 1

Text: HISTORY Left hilar opacity on CXR TRO malignancy vs infection; There is a fairly well defined mass like opacity measuring approximately 3.5 x 3.6cm projected over the left hilar region. TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 50 FINDINGS No previous comparison study. Note is made of the radiograph of 19 July 2019. Consolidation in the left upper lobe anterior segment with a cavitary component measuring 1.7 x 1.0cm (401-41) is seen. Perilesional ground-glass densities are noted. Associated wall thickening of the left upper lobe anterior segment bronchiole is noted, likely infective / inflammatory. A smaller focus of consolidation is seen in the middle lobe lateral segment (401-56). Minimal right pleural effusion. Major airways remain patent. No enlarged mediastinal, hilar, axillary or supraclavicular lymph node. Heart is not enlarged. No pericardial effusion. Visualized upper abdomen in the arterial phase appears grossly unremarkable. No destructive bony lesion. CONCLUSION Consolidation in the left upper lobe with a cavitary component and associated bronchiole wall thickening, as well as a smaller focus of consolidation in themiddle lobe, are probably infective / inflammatory. Considerations include tuberculous infection. Suggest clinical correlation and follow-up. Report Indicator: Further action or early intervention required Reported by: <DOCTOR>

Accession Number: f012dd48dcab7cd47d578658a5a486b8222527e11f17c4e3dc13645c52552e5b

Updated Date Time: 22/7/2019 12:39