# Patient ID: 1234, Performed Date: 14/6/2019 17:57

## Raw Radiology Report Extracted

Visit Number: bf70d2a47e4393529387bf75d1735853ebdec35274c7cd8634e3816f35d4db10

Masked\_PatientID: 1234

Order ID: f2d0203a105db0f429ce34df0bb0a5c58c6b95eb72dee7cb4a2b75ba2ea3658c

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 14/6/2019 17:57

Line Num: 1

Text: HISTORY ? right apical lung mass on CXR for evaluation gram negative bacteremia to investigate for source TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Omnipaque 350 - Volume (ml): 95 FINDINGS Comparison is made previous CTs of 2018. Tortuous right brachiocephalic trunk along with the right brachiocephalic vein accounts for the impression of right upper zone apical opacity on recent chest radiograph. There is no pulmonary lesion in the right upper lobe. The heart is enlarged. Small bilateral pleural effusion. Dependent bibasal lower lobe minor atelectasis. No enlarged hilar or mediastinal lymph nodes. Cirrhotic liver with hypertrophied caudate lobe crossing the IVC to its right side.No gross focal liver mass; the hepatic vessels are patent. Gallbladder is unremarkable. The biliary tracts are not dilated. The spleen is top normal size. The pancreas, adrenals and both kidneys are unremarkable other than small bilateral renal cysts. Small renal stones may be obscured by contrast excretion by the time of the venous phase although the previously noted left lower pole renal stones are probably reduced from previous CT, with a 5 mm stone (series 603, image 39) present. No hydronephrosis. No ascites or enlarged para-aortic or pelvic lymph nodes are detected. The prostate is mildly enlarged. The bladder and the bowel show no gross abnormality. The bone settings show no overt destructive lesion. CONCLUSION No right upper zone apical lung mass. Tortuous right brachiocephalic trunk along with the right brachiocephalic vein accounts for the impression of right upper zone apical opacity on recent chest radiograph. Cirrhotic liver with hypertrophied caudate lobe. No gross masses. Left renal stone appears smaller. Other minor or known findings as above. Report Indicator: Known / Minor Finalised by: <DOCTOR>

Accession Number: d1ef504f8a7e4d48a9568884f09f9ef3c93865d2d0edb36c7408d4d291e25f12

Updated Date Time: 15/6/2019 11:28

## Layman Explanation

The scan shows that the previous finding of a mass in the upper right lung was caused by a normal blood vessel, not a tumor. The heart is slightly enlarged and there is a small amount of fluid around the lungs. The liver shows signs of scarring. There is a small stone in the left kidney that is now smaller than before. Other minor findings include small cysts in the kidneys and a slightly enlarged prostate.

## Summary

The text was extracted from a \*\*CT scan\*\* report.  
  
\*\*1. Diseases:\*\*  
  
\* \*\*Cirrhosis:\*\* The liver is described as cirrhotic, with a hypertrophied caudate lobe.  
\* \*\*Bacteremia:\*\* The history mentions gram-negative bacteremia, which was investigated for a source.   
  
\*\*2. Organs:\*\*  
  
\* \*\*Lungs:\*\* No pulmonary lesion in the right upper lobe. Small bilateral pleural effusion. Dependent bibasal lower lobe minor atelectasis.   
\* \*\*Heart:\*\* Enlarged.  
\* \*\*Liver:\*\* Cirrhotic with hypertrophied caudate lobe crossing the IVC to its right side. No gross focal liver mass; the hepatic vessels are patent.  
\* \*\*Gallbladder:\*\* Unremarkable.  
\* \*\*Biliary tracts:\*\* Not dilated.  
\* \*\*Spleen:\*\* Top normal size.  
\* \*\*Pancreas:\*\* Unremarkable.  
\* \*\*Adrenals:\*\* Unremarkable.  
\* \*\*Kidneys:\*\* Unremarkable other than small bilateral renal cysts. Small renal stones may be obscured by contrast excretion. Previously noted left lower pole renal stones are probably reduced from previous CT, with a 5 mm stone (series 603, image 39) present. No hydronephrosis.  
\* \*\*Prostate:\*\* Mildly enlarged.  
\* \*\*Bladder:\*\* No gross abnormality.  
\* \*\*Bowel:\*\* No gross abnormality.  
\* \*\*Bones:\*\* No overt destructive lesion.  
  
\*\*3. Symptoms or Phenomena:\*\*  
  
\* \*\*Right apical lung mass:\*\* This was noted on a previous chest x-ray, but the CT scan shows it to be due to a tortuous right brachiocephalic trunk and vein.  
\* \*\*Small bilateral pleural effusion:\*\* This may indicate fluid buildup in the pleural space.  
\* \*\*Dependent bibasal lower lobe minor atelectasis:\*\* This refers to a collapsed area of the lung tissue.  
\* \*\*Tortuous right brachiocephalic trunk and vein:\*\* This abnormal anatomy is the cause of the apparent lung mass on the chest x-ray.  
\* \*\*Small bilateral renal cysts:\*\* These are fluid-filled sacs in the kidneys.  
\* \*\*Small renal stones:\*\* May be obscured by contrast.  
\* \*\*Mildly enlarged prostate:\*\* May be a sign of benign prostatic hyperplasia.