# Patient ID: 1829, Performed Date: 22/8/2017 13:01

## Raw Radiology Report Extracted

Visit Number: 49aeb084c9eaef34a24324f1d1df461074e110a2923980a9eb2521c2cc50fc9a

Masked\_PatientID: 1829

Order ID: 9c3b3f2c47aefa0ed22a9167eeffd41aab0305a53d9550866f3a1b618342eabe

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 22/8/2017 13:01

Line Num: 1

Text: HISTORY Resected pancreatic cancer Surveillance CT TECHNIQUE Scans of the thorax, abdomen and pelvis were acquired after the administration of Intravenous contrast: Omnipaque 350 - Volume (ml): 80 Positive Rectal Contrast was administered. FINDINGS Comparison was made with the CT scan of 10 June 2017. CHEST The mediastinal vessels opacify normally. No significantly enlarged mediastinal, hilar, axillary or supraclavicular lymph node is detected. The heart is normal in size. No pericardial effusion is seen. Minimal scarring with traction bronchiectasis is noted in the middle lobe. Small calcified granuloma in the right lower lobe is stable. 3 mm subpleural nodule in the right lower lobe is stable(Im 401/61). Retained secretions are noted in the left main bronchus. Scarring is noted in right lower lobe. No new suspicious pulmonary nodule, consolidation or ground-glass opacity is detected. No pleural effusion is present. ABDOMEN AND PELVIS Post Whipple procedure. Minimal fat stranding in the surgical bed shows interval improvement compared to the prior study. No recurrent mass identified in the surgical bed. Pancreatic stent is noted in situ. Minimal air fluid is noted in the intrahepatic ducts. Stable cyst in the left lobe of the liver. Ill-defined subcentimetre hypodensity in segment VI of the liver appears new since the prior CT (Im 501/40, 9 x 8 mm). Remnant pancreas appears unremarkable. Small fluid collection adjacent to the tail of the pancreas shows minimal interval improvement now measuring 2.7 x 2.3 cm. The spleen, adrenal glands and kidneys appear unremarkable. Prostate is enlarged. Urinary bladder is partially distended. Nosignificantly enlarged intra-abdominal or pelvic lymph node is seen. No free intraperitoneal fluid is detected. The bones appear unremarkable. CONCLUSION Post Whipple’s procedure prior pancreatic carcinoma. No recurrent mass identified in the surgical bed. Ill-defined subcentimetre hypodensity in segment VI of the liver appears new since the prior CT. This is not further characterised on this non-dedicated study. Attention on follow up study is suggested. May need further action Finalised by: <DOCTOR>

Accession Number: 1ea32915d437fe75dea1cd4187c30f91c5ee8519a69dfbb95e90c970f7c96b94

Updated Date Time: 22/8/2017 14:18

## Layman Explanation

Error generating summary.

## Summary

Error generating summary.