# Patient ID: 3145, Performed Date: 18/1/2019 15:53

## Raw Radiology Report Extracted

Visit Number: 9874fbc4963fa919746d31067f9b5807c3e4690f313264b718abd60b17b4c986

Masked\_PatientID: 3145

Order ID: 7ad926497cda7612ea120992489d7100af5bc0b717295dee984742b6877dbef4

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 18/1/2019 15:53

Line Num: 1

Text: HISTORY pulmonary nodules for follow up TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: NIL FINDINGS Previous CT chest dated 10 February 2017 was reviewed. Stable subcentimetre bilateral pulmonarynodules, some of them appear dense/calcified. For e.g., right upper lobe subpleural (3/39), left upper lobe (3/48, 3/57, 3/51, 3/54). Stable tiny calcified granulomas in the left lower lobe (3/52). No new suspicious pulmonary mass or consolidation. Trachea and central airways are patent. No supraclavicular, mediastinal, hilar or axillary lymphadenopathy. Heart size is normal. No pericardial or pleural effusion. Stable nodular soft tissue in the anterior mediastinum likely represents thymic tissue. Stable appearance of the thyroid gland, with an enlarged right lobe. Limited sections of the upper abdomen are grossly unremarkable within limits of this unenhanced study. Stable mild compression fracture of T6. No gross bony destruction. CONCLUSION 1. Subcentimetre pulmonary nodules, stable since at least 3 July 2016. These are presumed to be post-inflammatory. No new suspicious pulmonary mass. 2. Other findings as described above. Known / Minor Finalised by: <DOCTOR>

Accession Number: e38afae567734444063712ea282c17de9988aea042ba8883c1fe514e94668058

Updated Date Time: 18/1/2019 16:21

## Layman Explanation

Error generating summary.

## Summary

Error generating summary.