# Patient ID: 3715, Performed Date: 13/9/2018 18:40

## Raw Radiology Report Extracted

Visit Number: c2203614493bf84325cf935af1ad20a44747d40d229b907a594c61a0eaa6bd90

Masked\_PatientID: 3715

Order ID: 942079db20459aaf7addfdd922fbcade669e5092d4576d8c8796bc4273822ff5

Order Name: CT Chest or Thorax

Result Item Code: CTCHE

Performed Date Time: 13/9/2018 18:40

Line Num: 1

Text: HISTORY bilateral mid lobe and lingular bronchiectasis. persistent bilateral mid zone consolidation despite linezolid. for followup. TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: FINDINGS Images of the lungs from CT coronary study dated 20 January 2014 was reviewed. Bronchiectasis is present in middle lobe and lingula lobe with volume loss and mucous plugging of the airways. Centrilobular nodules in the lingula and middle lobe indicate small airway disease. Segmental bronchiectasis is present in the anterior basal segment of the right lower lobe and apical segment of the right upper lobe. There is no pleural or pericardial effusion. No significantly enlarged axillary or mediastinal lymph node. Visualised unenhanced upper abdomen is grossly unremarkable. No aggressive bony lesion. CONCLUSION Bronchiectasis is present in the middle lobe and lingula lobe with mucous plugging of the airways and airway inflammation resulting in tree-in-bud nodules. Segmental bronchiectasis is also present in the right upper lobe apical segment and right lower lobe anterior basal segment. May need further action Finalised by: <DOCTOR>

Accession Number: 8105752f4d5c18d044ecd2d2e7334927ee12f5797d0b5b99f8c68a0e012d2a78

Updated Date Time: 18/9/2018 11:32

## Layman Explanation

Error generating summary.

## Summary

Error generating summary.