# Patient ID: 4835, Performed Date: 12/4/2019 11:51

## Raw Radiology Report Extracted

Visit Number: d060aa9b9209befd415aa46c597cd49b9047452477066f83d52184652715d76d

Masked\_PatientID: 4835

Order ID: 953bee16ef83e28d228f318a062ba7d9c23f9be48b9a3cab2956be5979e4ee82

Order Name: CT Chest, Abdomen and Pelvis

Result Item Code: CTCHEABDP

Performed Date Time: 12/4/2019 11:51

Line Num: 1

Text: HISTORY 63 years old Chinese Male. 2 months of abdominal distension with mild change of habit seen at sandakan , cea and ca 19-9 in the thousands; 2, 473 usg hbs multiple liver mets clinically both lobes of liver palpable and enlarged CT TAP to check primary and stage the tumour kiv scope monday TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Iopamiro 370 - Volume (ml): 75 Positive Rectal Contrast FINDINGS Abdomen and pelvis There is a large massin the right side of the abdomen measuring 9.7 x 10 cm applied on to the distal transverse colon but involving portions of the adjacent jejunum. This mass appears to invade the mesentery and separate nodules are also seen within the mesentery measuring up to 2.5 cm (series 15 image 78) that is deemed due to enlarged lymph nodes. Stranding of the fat surrounding the mass is present. No dilatation of the bowel is seen to indicate intestinal obstruction. Nodular soft tissue is seen in the porta hepatis that are suspicious for a presence of enlarged lymph nodes. The liver is enlarged and contains multiple large hypodense nodules that are in keeping with those due to metastatic deposits. These are new nodules measure up to 9 cm indiameter with some showing evidence of central necrosis. No biliary dilatation is demonstrated. The gallbladder appears unremarkable. A trace of free fluid is present within the abdominal cavity. The pancreas, spleen and the adrenals are unremarkable. Small volume para-aortic lymph nodes are detected. The urinary bladder prostate and seminal vesicles are unremarkable. Thorax There is atelectasis at the anterior segment of the right lower lobe. No metastatic deposits are demonstrated within the chest No enlarged hilar or mediastinal lymph nodes are detected. The heart size is normal. CONCLUSION Large mass present in the left side of the abdomen involves the transverse colon and is suspicious for a colonic malignancy. This mass shows evidence of invasion into the adjacent small bowel with evidence of nodal involvement within the mesentery and porta hepatis. Multiple hepatic metastases are also present. Report Indicator: May need further action Finalised by: <DOCTOR>

Accession Number: be55bae8f133655f1ede50298644f6c29c5c139532076bd173b099298dbc82fc

Updated Date Time: 12/4/2019 15:08

## Layman Explanation

Error generating summary.

## Summary

Error generating summary.