# Audio file

[201632.m4a](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

# [Transcript](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:00:01](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[Patient ID 2016326 line CT test, next line, lungs, colon stable emphysematous changes in both lungs, full stop stable mild segmental bronchial wall thickening bilaterally full stop stable 2. Irregular nodules in lung apices bilaterally.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:00:21](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[Stable subpleural nodule in posterior segment of right lower lobe stop stable irrational audio with internal hyper densities in anteromedial based segment of flower low full stop.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:00:32](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[Stable multiple illdefined fibrolytic linear parenchymal densities scattered in both lungs, which stop next line spaces, colon, no pollution, or neocortex. Full stop neckline art colon no cardiomegaly or profusion. Full stop next line Iota, Colon, atheromatous iotic and coronary artery.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:00:52](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[Calcifications are seen.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:00:55](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[The distal descending thoracic iota.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:00:58](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[Is unusable and is stable compared to previously full stop next line lymph nodes, colon, no significant mediastinal, comma, axillary or lymphadenopathy. Full stop. Next line bones colon degenerate changes in thoracic spine. Full stop. Next line soft tissues colon. Unremarkable.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:01:18](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[Stop next slide impression.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:01:20](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[Colon next line stable emphysematous lungs stable. Mild bronchiolitis. Full stop. Next line stable at Lunga pieces bilaterally. Full stop. Next line. Stable. Support audio in posterior segment of right lower lobe full stop. Stable.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:01:40](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[In left lower lobe, full stop.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[00:01:42](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)

[Next line, next line and you will distill listening thoracic iota full stop next line in the report.](https://sempra-my.sharepoint.com/personal/mjoung_sempra_com/Documents/Transcribed%20Files/201632.m4a)