

**Payson Regional Hospital**  
**807 South Ponderosa**  
**Payson, AZ 85541**  
**928-474-3222**

<b>Patient Number</b> 4659691		<b>I/P - O/P</b>								
<b>Patient Name &amp; Address</b> BURNETT RANDALL D 210 E PHOENIX ST PAYSON AZ 85541  (928)951-3830				<b>Birthdate</b> 08/23/1961		<b>Adv. Directive</b> N		<b>History Number</b> 000141753		
				<b>Patient Social Security Number</b> 559-55-5568		<b>Age</b> 51	<b>Sex</b> M	<b>Race</b> W	<b>Status</b> M	<b>Rel</b> U
				<b>Privacy Notice Received (Y/N) / Date</b>		<b>Ethnicity</b> NOT HISPANIC OR LATINO				
				<b>Service</b> RAD		<b>Room &amp; Bed Number</b>		<b>Preferred Language</b> ENGLISH		
				<b>Admit Date &amp; Time</b> 06/12/13 07:31		<b>Discharge Date &amp; Time</b> 06/12/13 07:31				
<b>Patient Employer &amp; Address</b>				<b>In Case of Emergency - Contact 1</b>  BURNETT BRENDA 210 E PHOENIX ST PAYSON AZ 85541  (928)951-3830 SPOUSE			<b>Contact 2</b>			
<b>Guarantor Name &amp; Address</b> BURNETT RANDALL D 210 E PHOENIX ST 210 E PHOENIX ST PAYSON AZ 85541  (928)951-3830 SELF				<b>Guarantor Employer Name &amp; Address</b>			<b>Financial Class</b> G		<b>Legal Status</b>	
							<b>Guarantor Social Security Number</b> 559-55-5568			
						<b>Discharge Status</b> 1		<b>Last Discharge Date</b> 08/07/13		
<b>Payor</b>	<b>Plan</b>	<b>Payor Name/Address/Phone</b>			<b>Name of Insured</b>					
70	1	VETERANS ADMIN PHOENIX 650 EAST INDIAN SCHOOL RD PHOENIX AZ 85012 (602)277-5551			BURNETT RANDALL D 18 SELF DOB: 08/23/1961 TAN#:874091322			Policy #: 559555568 Group #: 99999		
0	0				DOB: TAN#:			Policy #: Group #:		
0	0				DOB: TAN#:			Policy #: Group #:		
<b>Admitting Diagnosis</b> 78630 COUGHING UP BLOOD						<b>Primary Care Physician</b> LOWE MICHAEL P MD				
<b>Admitting Physician</b> 884 LOWE MICHAEL P MD					<b>Attending Physician</b> 884 LOWE MICHAEL P MD					
<b>Accident Data</b>						<b>Isolation Status</b>				
<b>Accident Code:</b>		<b>Accident Date:</b>		<b>Place:</b>		<b>Onset:</b>		<b>MRSA:</b>		<b>VRE:</b>
<b>Comments</b> RAD VA PHX DX/ COUGHING UP BLOOD CT CHEST										
<b>Referral Source</b>						<b>Admit By</b> NDE				



>>>> 4659691 000141753 RAD 06/12/13 07:31

\*\* 01504659691 FACE150 ADMISSIONS 06/12/13 000141753 BURNETT RANDALL D

- PAYSON REGIONAL MEDICAL CENTER  
- 807 S. Ponderosa  
- Payson, AZ 85541  
- 928-472-1357

- RADIOLOGY REPORT

Name: BURNETT, RANDALL D

MRN: 141753 Room#: DOB: 8/23/1961  
Account#: 4659691 Bed#: Age: 51yr  
Pt Type: RAD Sex: M  
Exam Date/Time: 6/12/2013 7:39:00 AM

Order #: 100  
Accession #: 46596910000100  
Exam Description: CT-CHEST WITHOUT 1631531

Dictated By: Jeffrey C. Crosby, M.D.  
Ordering Physician: LOWE, MICHAEL MD  
Attending Physician: LOWE, MICHAEL MD  
Primary Care Physician: LOWE, MICHAEL MD  
FINAL REPORT

- EXAM: CT-CHEST WITHOUT 1631531

CLINICAL HISTORY:

Prostate cancer. Coughing up blood 43 weeks. Comparison exam none available.

Findings:

Multiple noncontrast axial CT images of the chest has been obtained from the thoracic inlet to the dome of the diaphragms.

There is a 1.4 cm nodule in the mid right upper lobe on image number 66.

Mild areas of air trapping noted in the lungs.

Pleural-based density along the anterior right upper lobe chest measuring 2.9 mm on image number 155. There is a 0.8 mm patchy density abutting the left major fissure on image number 178. Additional areas of ground-glass opacity in the basal zones of the lungs.

This can be due to edema or infectious change.

There is no mediastinal hilar axillary supraclavicular adenopathy.

Mild bronchial wall prominence noted which could reflect mild bronchitis.

There is no pericardial effusion. The thoracic aorta is normal caliber.

Upper aspect of the liver and spleen is unremarkable. Small hiatal hernia identified.

Bone windows: There are no acute fractures of the ribs. Bone loss in the right mid chest which could be congenital versus postsurgical. Details of previous surgery. However not available.

No pathologic fractures of the ribs seen.

Impression:

1. Foci of ground-glass opacities, air trapping lungs bilaterally. This is non specific. This could reflect mild edema or infectious change.
2. There is a small pulmonary nodule in the right midlung field measuring 1.4 cm. There is also a patchy density abutting the left major fissure. This could be on the basis of granulomatous exposure. Neoplasm not excluded. PET imaging may be considered to evaluate for metabolic activity. A repeat chest CT in 3 months is suggested.
3. There is marginal prominence of the bronchi which could reflect mild bronchitis

RADIOLOGY REPORT

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Account#: 4659691  
Order#: 100  
Exam Description: CT-CHEST WITHOUT 1631531

Dictated by: Jeffrey C. Crosby, M.D.  
DD: 6/12/2013 8:28:51 AM  
Electronically signed by: Jeffrey C. Crosby, M.D.  
Signed Date: 6/12/2013 08:27:09

Document: 229807  
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