# Row 2058

Visit Number: 34ab9cdcdc8419d021b50ec91361b07069fa009f5cacb028849dff9962dc713a

Masked\_PatientID: 2054

Order ID: 5538bd4e1274b9f4012b4bda42b10b14394d0ffa05e6adb21b6aa9ec8d900e27

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 10/3/2016 11:12

Line Num: 1

Text: HISTORY fast AF REPORT No prior relevant study is available for comparison. The heart size appears grossly enlarged despite accounting for the AP projection. There is pulmonary venous congestion with upper lobe diversion and interstitial lines. Increased airspace opacities are noted at the left retrocardiac region. Obscuration of the left costophrenic angle is likely due to a small effusion. The above findings are suggestive of congestive cardiac failure. Please correlate clinically to exclude concomitant infection. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 3004ccfb98698e18166c08b069d30d2b449432081a0e3633544339f329f3ff28

Updated Date Time: 10/3/2016 23:48

## Layman Explanation

This radiology report discusses HISTORY fast AF REPORT No prior relevant study is available for comparison. The heart size appears grossly enlarged despite accounting for the AP projection. There is pulmonary venous congestion with upper lobe diversion and interstitial lines. Increased airspace opacities are noted at the left retrocardiac region. Obscuration of the left costophrenic angle is likely due to a small effusion. The above findings are suggestive of congestive cardiac failure. Please correlate clinically to exclude concomitant infection. Further action or early intervention required Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

No diseases detected.  
No specific organs mentioned.  
No symptoms mentioned.