# Row 2790

Visit Number: 62ddfd7fad465a695e50e9f49c8d063ea6ef8b4c8162784ef53c58aa8a6bc36b

Masked\_PatientID: 2790

Order ID: a90c905db5e637b527da43238b5c0fdd579b7c814b5c8a783d7bf267dce77671

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 05/10/2017 14:57

Line Num: 1

Text: HISTORY persistent O2 dependence TRO HAP REPORT Compared with a study dated 1 October 2017. The heart size is upper limit of normal. Atheromatous mural calcification aortic arch is seen. No confluent consolidation or discrete mass lesion seen. However blunting of bilateral costophrenic angles noted, which may represent sliver of pleural effusions. In addition there are subtle increased markings in bilateral perihilar region, which may represent underlying airway inflammation or early infective change. No evidence of pneumothorax. Known / Minor Finalised by: <DOCTOR>

Accession Number: 1f1ce1024ad9b26f5b4b29581da7af2587e5530ca91b668d22f5d2e49815d224

Updated Date Time: 06/10/2017 7:55

## Layman Explanation

This radiology report discusses HISTORY persistent O2 dependence TRO HAP REPORT Compared with a study dated 1 October 2017. The heart size is upper limit of normal. Atheromatous mural calcification aortic arch is seen. No confluent consolidation or discrete mass lesion seen. However blunting of bilateral costophrenic angles noted, which may represent sliver of pleural effusions. In addition there are subtle increased markings in bilateral perihilar region, which may represent underlying airway inflammation or early infective change. No evidence of pneumothorax. Known / Minor Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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