# Row 4855

Visit Number: 5f94e207f76ed83ecaac7a74ffb7849aefebe178b800bca916e3bede1c58f7e0

Masked\_PatientID: 4855

Order ID: 0dbe4fa3f4e6468cb36609ad4476112197e7be38b2eaf2f9cb5a4a0ab3227a8f

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 03/1/2015 4:23

Line Num: 1

Text: HISTORY sob. REPORT There is no relevant previous study available for comparison. There is a large left pleural effusion that causes compressive atelectasis of the left lung. There is significant contralateral mediastinal and tracheal deviation. A pleural metastasis or underlying lung malignancy cannot be excluded, suggest further evaluation with CT after draining the pleural effusion. The cardiac size cannot be accurately assessed. There is elevation of the right hemidiaphragm. The right lung grossly appears unremarkable. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: b82a7a17da2f899c451a954e18e4cafc2ea07cc1151fb43fd856e12631875981

Updated Date Time: 03/1/2015 15:20

## Layman Explanation

This radiology report discusses HISTORY sob. REPORT There is no relevant previous study available for comparison. There is a large left pleural effusion that causes compressive atelectasis of the left lung. There is significant contralateral mediastinal and tracheal deviation. A pleural metastasis or underlying lung malignancy cannot be excluded, suggest further evaluation with CT after draining the pleural effusion. The cardiac size cannot be accurately assessed. There is elevation of the right hemidiaphragm. The right lung grossly appears unremarkable. 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.