# Row 5665

Visit Number: 32181b88c25b62a937a02cea10f712adb9317d44eb96a980917652dd88a7d81e

Masked\_PatientID: 5664

Order ID: 426fdb312aabc6c9770e9cf669838a39d908691354b88f2f42ed60b1e17b23b8

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 09/5/2017 23:55

Line Num: 1

Text: HISTORY to assess for interval change from last CXR 5/5 treated as for Right HAP, now having low grade fever now readm for bleeding over ascites drain, CRIB today REPORT Comparison is made with the prior chest radiograph of 5 May 2017. The tip of the Port-A-Cath is in the expected region of the superior vena cava. Left retrocardiac collapse/consolidation with pleural effusion are unchanged in appearance. Pleural thickening in the left apex is present. Rod with thoracicdextroscoliosis is seen again. May need further action Finalised by: <DOCTOR>

Accession Number: daf26f8f5bc310a4b30a9626882d34d9f8b69098a020dde72775e86453685a24

Updated Date Time: 11/5/2017 14:03

## Layman Explanation

This radiology report discusses HISTORY to assess for interval change from last CXR 5/5 treated as for Right HAP, now having low grade fever now readm for bleeding over ascites drain, CRIB today REPORT Comparison is made with the prior chest radiograph of 5 May 2017. The tip of the Port-A-Cath is in the expected region of the superior vena cava. Left retrocardiac collapse/consolidation with pleural effusion are unchanged in appearance. Pleural thickening in the left apex is present. Rod with thoracicdextroscoliosis is seen again. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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