# Row 5846

Visit Number: 829e786cca63d15b77a440a25f3d31eeccd5ac98044e3445d47eee09aafe3030

Masked\_PatientID: 5844

Order ID: 28e27de7c9f51b2867f2e4fe95427d5c8aab5efbd39f8557abc1b0470bdd6476

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 09/11/2016 11:42

Line Num: 1

Text: HISTORY . cough. blood stained sputum. REPORT CHEST (PA ERECT) TOTAL OF ONE IMAGE The trachea, mediastinum and heart shadow are deviated to the left side. The left hemithorax shows volume loss. There is extensive parenchymal scarring, pleural thickening and fibrosis and bronchiectasis in the left upper and middle zones most likely due to previous granulomatous infection. Similar changes are also found in the right upper zone but to a lesser degree. The left hilum is obscured by the opacities in the upper part of the left upper lung. The left lateral costophrenic recess and angle are blunted by pleural reaction. There is collapse of the L1 vertebral body of uncertain aetiology. CONCLUSION In view of the submitted diagnosis of haemoptysis, the possibility of a neoplasm should be ruled out with further imaging i.e. CT thorax. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 5ceb55235c43e071b11ccccf4bddc8840664f1ce6f43dcf738937b8404ee1169

Updated Date Time: 09/11/2016 12:49

## Layman Explanation

This radiology report discusses HISTORY . cough. blood stained sputum. REPORT CHEST (PA ERECT) TOTAL OF ONE IMAGE The trachea, mediastinum and heart shadow are deviated to the left side. The left hemithorax shows volume loss. There is extensive parenchymal scarring, pleural thickening and fibrosis and bronchiectasis in the left upper and middle zones most likely due to previous granulomatous infection. Similar changes are also found in the right upper zone but to a lesser degree. The left hilum is obscured by the opacities in the upper part of the left upper lung. The left lateral costophrenic recess and angle are blunted by pleural reaction. There is collapse of the L1 vertebral body of uncertain aetiology. CONCLUSION In view of the submitted diagnosis of haemoptysis, the possibility of a neoplasm should be ruled out with further imaging i.e. CT thorax. 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.