# Row 5986

Visit Number: 2e12f5ffdda87a2ca3475419703dfcd5e93497340a87326afe5e1e9c5f54baa4

Masked\_PatientID: 5981

Order ID: e6d77e871d742d1bf5efb0147cdff350206df1fb5e6dc6e743ce95b47f6647ba

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 28/3/2018 15:31

Line Num: 1

Text: HISTORY . L Fibrothorax. REPORT CHEST (PA ERECT) TOTAL OF ONE IMAGE The CT thorax study of 6 April 2016 was referenced with the report. The chest radiograph study of 31 October 2016 was reviewed with the report. In the current chest radiograph, there is prominent volume loss of the left hemithorax with shift of the mediastinum, heart shadow and trachea to the left side. The limited volume of aerated left lung parenchyma shows bronchiectasis. The right lung shows volume compensatory hypertrophy. The anterior junction line is shifted to the left side. There is extensive scarring in the right upper zone. May need further action Finalised by: <DOCTOR>

Accession Number: 8309d55515b6ef171296265720756f885e175988162abdbe105691b1f261d713

Updated Date Time: 29/3/2018 1:31

## Layman Explanation

This radiology report discusses HISTORY . L Fibrothorax. REPORT CHEST (PA ERECT) TOTAL OF ONE IMAGE The CT thorax study of 6 April 2016 was referenced with the report. The chest radiograph study of 31 October 2016 was reviewed with the report. In the current chest radiograph, there is prominent volume loss of the left hemithorax with shift of the mediastinum, heart shadow and trachea to the left side. The limited volume of aerated left lung parenchyma shows bronchiectasis. The right lung shows volume compensatory hypertrophy. The anterior junction line is shifted to the left side. There is extensive scarring in the right upper zone. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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