# Row 6067

Visit Number: 64cbdbfc6543357c2e9112a892988697638d15b17dd63d320182d8a7fee91e47

Masked\_PatientID: 6052

Order ID: 65de04ffaa9f1053c963f90289baf31bb7df4a464e7b6a41c316f308af5ece21

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 15/10/2018 18:04

Line Num: 1

Text: HISTORY SOB B/G METS NSCLC REPORT CHEST AP SITTING Comparison is made with the prior radiograph of 11 Aug 2018. There is complete opacification of the left hemithorax, likely due to massive pleural effusion. There is mass effect on the trachea and mediastinum, resulting in rightward mediastinal shift. The left lung is likely collapsed. Haziness in the right paracardiac region is also noted. The cardiac size cannot be assessed as the left cardiac border is obscured. Lytic lesion in the right acromion is noted, in keeping with metastasis. The vertebral metastases are better visualized on CT. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: d4f6fad41bad3bc050b87304e85450b8fe2a14496e54ebd9728b7566effe3459

Updated Date Time: 16/10/2018 11:03

## Layman Explanation

This radiology report discusses HISTORY SOB B/G METS NSCLC REPORT CHEST AP SITTING Comparison is made with the prior radiograph of 11 Aug 2018. There is complete opacification of the left hemithorax, likely due to massive pleural effusion. There is mass effect on the trachea and mediastinum, resulting in rightward mediastinal shift. The left lung is likely collapsed. Haziness in the right paracardiac region is also noted. The cardiac size cannot be assessed as the left cardiac border is obscured. Lytic lesion in the right acromion is noted, in keeping with metastasis. The vertebral metastases are better visualized on CT. 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.