# Row 6883

Visit Number: b1b5e4424fea9be988acd20dd2f6d0a34054b409f075696a3aa44a109c4aa7c1

Masked\_PatientID: 6877

Order ID: ff4447fa967f54a4a3298d829766ffbc495b9b2d730dd22691453a5b581c7d45

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 26/3/2019 16:43

Line Num: 1

Text: HISTORY SOB ?fluid overload B\g atrial flutter REPORT Comparison: 5 Feb 2019 Cardiomegaly, upper venous diversion (worse) and bilateral small pleural effusions (worse on the left) likely represent cardiogenic pulmonary oedema. The single intact lead of AICD is projected in stable position over the left ventricle. Degenerative changes of the spine are noted. Faint aortic calcification seen. Report Indicator: Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: bccc570fe6b4746e7cd07c07bbe051cebffe720091399f9f958540401c04099b

Updated Date Time: 26/3/2019 17:51

## Layman Explanation

This radiology report discusses HISTORY SOB ?fluid overload B\g atrial flutter REPORT Comparison: 5 Feb 2019 Cardiomegaly, upper venous diversion (worse) and bilateral small pleural effusions (worse on the left) likely represent cardiogenic pulmonary oedema. The single intact lead of AICD is projected in stable position over the left ventricle. Degenerative changes of the spine are noted. Faint aortic calcification seen. Report Indicator: 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.