# Row 6981

Visit Number: f2c79ad7cf2f2796a06170f9d17e2f4f1092497e18d0797c69c4ceef268b8096

Masked\_PatientID: 6970

Order ID: 14ae6b5359c9b9144d40e5ce7587b9ccd08b60beae29a9651a152b67bcdb0c97

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 23/11/2016 7:42

Line Num: 1

Text: HISTORY PTX post CT Guided lung biopsy. sp chest drain. To evaluate interval change REPORT Comparison dated 21/11/2016. The trachea is midline. Cardiac silhouette cannot be adequately assessed on this projection. Right-sided chest tube remains in unchanged position. There is mild perihilar vascular congestion with prominent interstitial markings again seen in both lung bases, slightly worse when compared to prior study. Underlying infection cannot be excluded. Mild blunting of the costophrenic recesses suggests small bilateral pleural effusions. A right pneumothorax is evident, measuring up to 12 mm in maximal interpleural distance. No significant left-sided pneumothorax is identified. There is extensive subcutaneous soft tissue emphysema seen, right greater than left, along both chest walls and in the supraclavicular regions bilaterally. The degree of soft tissue emphysema is increased when compared to prior study. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 6f5c283a5ca1eed0251870433426184e87b648a7104a42ede83a0dad29021ada

Updated Date Time: 23/11/2016 18:04

## Layman Explanation

This radiology report discusses HISTORY PTX post CT Guided lung biopsy. sp chest drain. To evaluate interval change REPORT Comparison dated 21/11/2016. The trachea is midline. Cardiac silhouette cannot be adequately assessed on this projection. Right-sided chest tube remains in unchanged position. There is mild perihilar vascular congestion with prominent interstitial markings again seen in both lung bases, slightly worse when compared to prior study. Underlying infection cannot be excluded. Mild blunting of the costophrenic recesses suggests small bilateral pleural effusions. A right pneumothorax is evident, measuring up to 12 mm in maximal interpleural distance. No significant left-sided pneumothorax is identified. There is extensive subcutaneous soft tissue emphysema seen, right greater than left, along both chest walls and in the supraclavicular regions bilaterally. The degree of soft tissue emphysema is increased when compared to prior study. 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.