# Row 7221

Visit Number: afb8f7d78d33b6e528a0c991e7c6daa400df56ad3639eff104aa8986bbf25262

Masked\_PatientID: 7195

Order ID: d44d4b5fce7a7474194a11a245ddb5bca05f8f36c3fc07f5472e06d0476be3af

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 25/10/2016 18:17

Line Num: 1

Text: HISTORY after insertion of left sided chest drain REPORT Chest radiograph: AP sitting The previous chest radiograph dated 25 October 2016 and CT chest dated 22 October 2016 were reviewed. The endotracheal tube, right central venous catheter and nasogastric tube are in satisfactory position. Interval insertion of a left chest drain is noted, its tip projected over the left lower zone. There is interval reduction in size in the left pleural effusion. Midlinesternotomy wires, mediastinal clips and epicardial pacing wires are present. The heart size cannot be accurately assessed in this projection. The thoracic aorta is unfolded and mural calcifications are seen within it. Enlarged pulmonary vessels, perihilar consolidation, Kerley B lines and bilateral pleural effusions are suggestive of pulmonary alveolar oedema. May need further action Finalised by: <DOCTOR>

Accession Number: 78649ea21b3882dae03fa7286f3df9b6605d56033c1c8ce7cd4f9a06d251492f

Updated Date Time: 26/10/2016 15:55

## Layman Explanation

This radiology report discusses HISTORY after insertion of left sided chest drain REPORT Chest radiograph: AP sitting The previous chest radiograph dated 25 October 2016 and CT chest dated 22 October 2016 were reviewed. The endotracheal tube, right central venous catheter and nasogastric tube are in satisfactory position. Interval insertion of a left chest drain is noted, its tip projected over the left lower zone. There is interval reduction in size in the left pleural effusion. Midlinesternotomy wires, mediastinal clips and epicardial pacing wires are present. The heart size cannot be accurately assessed in this projection. The thoracic aorta is unfolded and mural calcifications are seen within it. Enlarged pulmonary vessels, perihilar consolidation, Kerley B lines and bilateral pleural effusions are suggestive of pulmonary alveolar oedema. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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