# Row 7323

Visit Number: 5b87f7fddebf4188db87c065f740ded66e2485d27526a8d33cc14c68940fc1f9

Masked\_PatientID: 7320

Order ID: 19937869b70c6b66ba47b956768ae05a6a02eccb0181ab64566067644c860dbf

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 23/11/2017 7:36

Line Num: 1

Text: HISTORY desaturation newly diagnosed APML REPORT Comparison is made previous chest radiograph dated 22/11/2017. Heart size cannot be accurately assessed in this AP view. NG tube is seen with distal tip below the inferior limits of the radiograph. Right-sided CVC noted with distal tip in the SVC. Extensive bilateral diffuse opacities in the mid to lower zones demonstrate further interval worsening and raise the suspicion for acute pulmonary oedema. Underlying infection or pulmonary haemorrhage is not excluded. May need further action Finalised by: <DOCTOR>

Accession Number: c0dac0b095e9f9c55ef579f36551097b2389dacdf0e5f0d264db68cfbb2d0797

Updated Date Time: 24/11/2017 17:40

## Layman Explanation

This radiology report discusses HISTORY desaturation newly diagnosed APML REPORT Comparison is made previous chest radiograph dated 22/11/2017. Heart size cannot be accurately assessed in this AP view. NG tube is seen with distal tip below the inferior limits of the radiograph. Right-sided CVC noted with distal tip in the SVC. Extensive bilateral diffuse opacities in the mid to lower zones demonstrate further interval worsening and raise the suspicion for acute pulmonary oedema. Underlying infection or pulmonary haemorrhage is not excluded. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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