# Row 760

Visit Number: d7cd7a3cbc3b4556e58e0419eb402674816460647231e7cc37f4a9ce7a52b4aa

Masked\_PatientID: 743

Order ID: 569ca1204223cdbbcb393bbb6aaa88c3138356f9920ac861dfe6c3b4540fff30

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 28/3/2019 22:27

Line Num: 1

Text: HISTORY sepsis ?pneumonia ?T2MI trolley A86 REPORT AP sitting chest radiograph. Prior chest radiograph of 2 February 2019 is reviewed. Midline sternotomy wires and mediastinal clips from prior CABG are noted. The cardiac size is enlargeddespite the AP projection. There is prominent upper lobe diversion. Hazy opacities in the bilateral lower zones are noted, suspicious for possible early inflammatory \ infective change in the background of interstitial oedema. However no overt pulmonary oedema or sizable pleural effusion seen. No evidence of pneumothorax Report Indicator: May need further action Reported by: <DOCTOR>

Accession Number: 67b684f70b3c191107eb8837cbaaf9e9b5361049ad134a4f1f7fe9fc265c5b82

Updated Date Time: 29/3/2019 13:44

## Layman Explanation

This radiology report discusses HISTORY sepsis ?pneumonia ?T2MI trolley A86 REPORT AP sitting chest radiograph. Prior chest radiograph of 2 February 2019 is reviewed. Midline sternotomy wires and mediastinal clips from prior CABG are noted. The cardiac size is enlargeddespite the AP projection. There is prominent upper lobe diversion. Hazy opacities in the bilateral lower zones are noted, suspicious for possible early inflammatory \ infective change in the background of interstitial oedema. However no overt pulmonary oedema or sizable pleural effusion seen. No evidence of pneumothorax Report Indicator: May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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