# Row 7629

Visit Number: 2223bd4ba11ff739188827358cd2f20662950b71d2b726cc7634fd0ae9cd4383

Masked\_PatientID: 7600

Order ID: 3d9829afacd4040decb37dc0b3c9bf21f3b7b423fe762fad378a3493ae808c0c

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 13/6/2017 17:44

Line Num: 1

Text: HISTORY lvad, with sah ccf? REPORT The chest radiograph of 15 May 2017 and CT scans of 20 May 2016 and 4 May 2016 were reviewed. Status post CABG. Median sternotomy wires are seen. A prosthetic heart valve and LVAD are in situ. The heart appears enlarged despite the AP projection. The aorta is unfolded and calcified. There is prominence of the pulmonary vasculature with haziness in the lower zones which may be related to underlying fluid overload. No focal consolidation or sizable pleural effusion is seen. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 43ee2d577bb10ec7965b2041a01394fb6123d875532eeec227519501253701b9

Updated Date Time: 14/6/2017 10:30

## Layman Explanation

This radiology report discusses HISTORY lvad, with sah ccf? REPORT The chest radiograph of 15 May 2017 and CT scans of 20 May 2016 and 4 May 2016 were reviewed. Status post CABG. Median sternotomy wires are seen. A prosthetic heart valve and LVAD are in situ. The heart appears enlarged despite the AP projection. The aorta is unfolded and calcified. There is prominence of the pulmonary vasculature with haziness in the lower zones which may be related to underlying fluid overload. No focal consolidation or sizable pleural effusion is seen. 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.