# Row 8121

Visit Number: 914419d4a0c418578a79139ee4f33615735e5fe71a9d40002f3a3b00ddcf442e

Masked\_PatientID: 8119

Order ID: fc20ecb47ce3ea8f844ad6cc3e01cd30faa2e651c0078dc0b91dac3162dee7d7

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 06/4/2016 20:19

Line Num: 1

Text: HISTORY SOB for investigation REPORT Chest X-ray: AP sitting No prior chest radiograph is available for comparison. The cardiac silhouette cannot be accurately assessed on AP projection but appears enlarged. There is cephalisation of pulmonary vasculature. Pulmonary venous congestion is noted. There is diffuse airspace shadowing in both lungs predominantly in the perihilar regions and bilateral lower zones. Small bilateral pleural effusions may be present. Overall findings are compatible with pulmonary oedema. Superimposed infection cannot be excluded. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: ddf41fd835468802e901a1af6ff519fc3b21c807bbadd4c7713c688bc7f0148a

Updated Date Time: 07/4/2016 10:08

## Layman Explanation

This radiology report discusses HISTORY SOB for investigation REPORT Chest X-ray: AP sitting No prior chest radiograph is available for comparison. The cardiac silhouette cannot be accurately assessed on AP projection but appears enlarged. There is cephalisation of pulmonary vasculature. Pulmonary venous congestion is noted. There is diffuse airspace shadowing in both lungs predominantly in the perihilar regions and bilateral lower zones. Small bilateral pleural effusions may be present. Overall findings are compatible with pulmonary oedema. Superimposed infection cannot be excluded. 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.