# Row 8281

Visit Number: 2544f0836945c3ca307ed85d733d36c639ac6c7ffe622bef0085266238acc349

Masked\_PatientID: 8269

Order ID: b76b11f9d86abecc8854b4c35a1b82a24c53f649a006c357b33f361c47eceffc

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 26/11/2016 13:13

Line Num: 1

Text: HISTORY confusion ?new onset HAP REPORT CHEST:AP SITTING Comparison is made with the radiograph of 23 November, 2016. Right infraclavicular dual-lead pacemaker is visualised with tips of the lead at the right atrium and ventricle, respectively. The heart is enlarged. Prominent perihilar vascularity, peripheral Kerley B lines and small effusions, suggesting fluid overload. No pneumothorax or subphrenic free gas. Air space density in the lung bases is largely unchanged. There is aortic atherosclerosis with dense mural calcifications. Mild thoracolumbar spondylosis. Known / Minor Finalised by: <DOCTOR>

Accession Number: f9d994cafda22eafa7b22fb28b73e6e1303aa071b306c13fc90820debc3a6113

Updated Date Time: 28/11/2016 8:36

## Layman Explanation

This radiology report discusses HISTORY confusion ?new onset HAP REPORT CHEST:AP SITTING Comparison is made with the radiograph of 23 November, 2016. Right infraclavicular dual-lead pacemaker is visualised with tips of the lead at the right atrium and ventricle, respectively. The heart is enlarged. Prominent perihilar vascularity, peripheral Kerley B lines and small effusions, suggesting fluid overload. No pneumothorax or subphrenic free gas. Air space density in the lung bases is largely unchanged. There is aortic atherosclerosis with dense mural calcifications. Mild thoracolumbar spondylosis. Known / Minor Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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