# Row 8402

Visit Number: 5d46dffa0acc9007dec179099c89d1be70f624a365860bee9b3c16c51d91708f

Masked\_PatientID: 8395

Order ID: a02d1c9f084894fe652f1e194f8ce9e0be941eff441508f2060e355c503a0243

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 14/2/2018 16:22

Line Num: 1

Text: HISTORY CLL. Cough, rhinorrhoea. Bibasal creps. Raised WBC. REPORT Prior radiograph 5 July 2017 was reviewed. Prior CT study 10 August 2017 was also reviewed. There is interval increase in multiple patchy opacification in both lungs, eg the periphery of the upper zones bilaterally, as well as reticulonodular shadowing in the right lower zone. There may be related to infective exacerbations. There is no pleural effusion. Follow-up after appropriate treatment is recommended. May need further action Finalised by: <DOCTOR>

Accession Number: 02ed43baa7b12e8c4dfe43d8c6ac9a9252aabe24c61b4ae1600bf41664c88f72

Updated Date Time: 14/2/2018 17:20

## Layman Explanation

This radiology report discusses HISTORY CLL. Cough, rhinorrhoea. Bibasal creps. Raised WBC. REPORT Prior radiograph 5 July 2017 was reviewed. Prior CT study 10 August 2017 was also reviewed. There is interval increase in multiple patchy opacification in both lungs, eg the periphery of the upper zones bilaterally, as well as reticulonodular shadowing in the right lower zone. There may be related to infective exacerbations. There is no pleural effusion. Follow-up after appropriate treatment is recommended. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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