# Row 8460

Visit Number: afe1a8192962546d8a2f410ea9172c156619568c8fc78f495c37998803d9853b

Masked\_PatientID: 8459

Order ID: 441584b6737a4e6ef49051d5302abdef991f526adcb26282dc6db316edbb898f

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 20/1/2017 9:52

Line Num: 1

Text: HISTORY Inferolatral STEMI Cx by CCF with bilateral pleural effusion REPORT Previous chest radiograph dated 17 January 2016. There is interval increase in the size of the right pleural effusion the left pleural effusion is largely unchanged. Air space opacities are again seen in both mid to lower zones possibly related to alveolar oedema but superimposed infection cannot be excluded. The hemidiaphragms are effaced, possibly due to collapse or consolidation. There is evidence of pulmonary venous congestion. The heart size cannot be assessed in this projection. Background degenerative changes of the imaged spine and old T12 compression fracture. May need further action Finalised by: <DOCTOR>

Accession Number: 747209432d6a7bcbefe361e9c11aa5a98f817d521bde55623098d0df1a5ec834

Updated Date Time: 20/1/2017 15:04

## Layman Explanation

This radiology report discusses HISTORY Inferolatral STEMI Cx by CCF with bilateral pleural effusion REPORT Previous chest radiograph dated 17 January 2016. There is interval increase in the size of the right pleural effusion the left pleural effusion is largely unchanged. Air space opacities are again seen in both mid to lower zones possibly related to alveolar oedema but superimposed infection cannot be excluded. The hemidiaphragms are effaced, possibly due to collapse or consolidation. There is evidence of pulmonary venous congestion. The heart size cannot be assessed in this projection. Background degenerative changes of the imaged spine and old T12 compression fracture. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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