# Row 8535

Visit Number: ac5a1286bcb049bd9e370858d6bddb2e31c74ff91b40a79056fb4919c26b8cda

Masked\_PatientID: 8524

Order ID: 611d706793b2401459890d5a44c5e4c0d64dc61a5b8ee5c9169faa745cdf1436

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 13/11/2016 22:10

Line Num: 1

Text: HISTORY fluid overload REPORT Comparison was made with previous chest radiograph dated 7/11/16. Dual lead pacemaker is noted in-situ. Patient is status post TAVI. Heart size is enlarged despite the AP projection. There is severe chest wall deformity as well as osteopenia and subperiosteal resorption indicating secondary hyperparathyroidism due to renal osteodystrophy. Moderate thoracolumbar scoliosis. As a result, there is poor visualisation of the lung fields. No pleural effusion is seen. Vascular calcifications are seen. May need further action Reported by: <DOCTOR>

Accession Number: 353cacf69e50e73dcde053f28a3ba8813e4c9dee0be9dc684e61e5979358932d

Updated Date Time: 14/11/2016 12:06

## Layman Explanation

This radiology report discusses HISTORY fluid overload REPORT Comparison was made with previous chest radiograph dated 7/11/16. Dual lead pacemaker is noted in-situ. Patient is status post TAVI. Heart size is enlarged despite the AP projection. There is severe chest wall deformity as well as osteopenia and subperiosteal resorption indicating secondary hyperparathyroidism due to renal osteodystrophy. Moderate thoracolumbar scoliosis. As a result, there is poor visualisation of the lung fields. No pleural effusion is seen. Vascular calcifications are seen. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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