# Row 9357

Visit Number: 7c4757553171ab6a824fc580437abaf80e43b4359b575e8e45514738528963b0

Masked\_PatientID: 9343

Order ID: 6aa5f9dad103de2f2ce06d54a1d8d23f44a9f9d5b1b6682e9641e5f6bec781a9

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 22/6/2016 5:16

Line Num: 1

Text: HISTORY SOB x past few days worse today REPORT Comparison was made with a previous radiograph of 2 May 2016. The tip of the AICD lead is projected over the right ventricle. The heart size is in the upper limit of normal. No focal consolidation, pleural effusion or pneumothorax is seen. Upper lobe diversion, prominent bronchovascular markings and Kerley B lines suggest pulmonary venous congestion. A calcification projected over the right upper quadrant likely correlates with the small cluster of gallstones seen on the recent CT study. May need further action Finalised by: <DOCTOR>

Accession Number: 925671b06680fe3c07f371a978ca912f4aac56e44087a67a389dd78ecd954000

Updated Date Time: 22/6/2016 14:54

## Layman Explanation

This radiology report discusses HISTORY SOB x past few days worse today REPORT Comparison was made with a previous radiograph of 2 May 2016. The tip of the AICD lead is projected over the right ventricle. The heart size is in the upper limit of normal. No focal consolidation, pleural effusion or pneumothorax is seen. Upper lobe diversion, prominent bronchovascular markings and Kerley B lines suggest pulmonary venous congestion. A calcification projected over the right upper quadrant likely correlates with the small cluster of gallstones seen on the recent CT study. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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