# Row 149

Visit Number: 89076d717f612079a3613208463401cc84d0104e7dc164a7ab298115fdc4ff05

Masked\_PatientID: 123

Order ID: 03d89d8e55e71caea93d3f6b96442e522c7d51d6a02e8ceb1e4bda76e117fde0

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 16/11/2016 12:32

Line Num: 1

Text: HISTORY likely right trapped lung REPORT Comparison was done with the previous study dated 14 November 2016. Midline sternotomy wires and mediastinal surgical sutures are in situ. Tip of the right neck central venous catheter remains projected over right atrium. Tip of the right chest drain is projected over the right lower zone. Right loculated pneumothorax in the right lower zone remains largely unchanged. Airspace opacity in bilateral lower zones and subsegmentalatelectasis in the left lower zone are largely unchanged. Small left pleural effusion persists. Heart size cannot be accurately assessed in this supine projection. May need further action Finalised by: <DOCTOR>

Accession Number: 9fb7496a72a2dc4c8bc9be086140963194ac075617c75bf7679afd657240aa72

Updated Date Time: 17/11/2016 14:16

## Layman Explanation

This radiology report discusses HISTORY likely right trapped lung REPORT Comparison was done with the previous study dated 14 November 2016. Midline sternotomy wires and mediastinal surgical sutures are in situ. Tip of the right neck central venous catheter remains projected over right atrium. Tip of the right chest drain is projected over the right lower zone. Right loculated pneumothorax in the right lower zone remains largely unchanged. Airspace opacity in bilateral lower zones and subsegmentalatelectasis in the left lower zone are largely unchanged. Small left pleural effusion persists. Heart size cannot be accurately assessed in this supine projection. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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