# Row 2043

Visit Number: e65c8c0d1b9c38076d5f448983ff143803eb06832104019403fa632dd1530830

Masked\_PatientID: 2042

Order ID: 86df7c3ebe50782d26bc1f9a656cee9b7f16f5a5b93128e6d41f73443ba53d11

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 20/7/2019 19:47

Line Num: 1

Text: HISTORY SOB REPORT There is no comparison study available. Cardiac size cannot be accurately assessed in this AP projection but appears enlarged. Prior CABG is noted. There is perihilar vascular prominence and small pleural effusions bilaterally, suggestive of underlying fluid overload. There is a 2.2 x 1.4 cm nodular opacity in the right midzone which appears to be abutting the pleural surface, with suggestion of mild adjacent pleural thickening. CT chest is recommended for further evaluation. Report Indicator: Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 6bc77adf3af8ee477641d4c6331aad9d75bac8fbe20cdfcacaefd272d087623b

Updated Date Time: 23/7/2019 10:32

## Layman Explanation

This radiology report discusses HISTORY SOB REPORT There is no comparison study available. Cardiac size cannot be accurately assessed in this AP projection but appears enlarged. Prior CABG is noted. There is perihilar vascular prominence and small pleural effusions bilaterally, suggestive of underlying fluid overload. There is a 2.2 x 1.4 cm nodular opacity in the right midzone which appears to be abutting the pleural surface, with suggestion of mild adjacent pleural thickening. CT chest is recommended for further evaluation. Report Indicator: Further action or early intervention required Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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