# Row 2317

Visit Number: d33225b8ed325b5db2303b1c1c0f785c47e0ef9ec4e57a8f009b87dd11719b79

Masked\_PatientID: 2312

Order ID: 2cb9b19deebdfe597edbbb18fcd8e67ab12b9f71659bc1144e3d461e82d6f8be

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 26/1/2015 16:39

Line Num: 1

Text: HISTORY fluid overload. REPORT Previous chest radiograph of 21 January 2015 was reviewed. Status post CABG as evidenced by midline sternotomy wires and mediastinal vascular clips. The heart size appears enlarged despite projection. Upper lobe blood diversion, perihilar vascular congestion, bilateral patchy airspace changes, right moderate pleural effusion and possibly a sliver of a left pleural effusion are seen. Findings are in keeping with acute pulmonary oedema. The patient's condition has progressed since 5 days ago. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 259838977a139abe93ca72d62194398bafaa9de543a6b7f8a4a6ac5202484e83

Updated Date Time: 27/1/2015 16:36

## Layman Explanation

This radiology report discusses HISTORY fluid overload. REPORT Previous chest radiograph of 21 January 2015 was reviewed. Status post CABG as evidenced by midline sternotomy wires and mediastinal vascular clips. The heart size appears enlarged despite projection. Upper lobe blood diversion, perihilar vascular congestion, bilateral patchy airspace changes, right moderate pleural effusion and possibly a sliver of a left pleural effusion are seen. Findings are in keeping with acute pulmonary oedema. The patient's condition has progressed since 5 days ago. 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.