# Row 3337

Visit Number: 60e46ed126fc505161ed5f226c046b4963e93901b08cee8a6737351479052907

Masked\_PatientID: 3314

Order ID: 07640b2b72637871d61a3d15522eacf0da41f3b9ee80148720d475b741a2472a

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 24/10/2018 16:45

Line Num: 1

Text: HISTORY assess for ptx post-chest tube removal REPORT AP sitting view Comparison is made with the prior radiograph dated 22/10/2018. There is interval removal of the left chest tube. The distal tip of the right central venous catheter is projected over the superior vena cava. The heart appears to be enlarged even taking into account the AP projection. There is a small left pleural effusion. There is left mid-zone opacification which may represent early infection which warrants clinical correlation. There is no pneumothorax. May need further action Reported by: <DOCTOR>

Accession Number: 158c10c6a249f221baf4e8b201fa8ea5430b848f99a0dbe71657c834f6bbb713

Updated Date Time: 25/10/2018 18:03

## Layman Explanation

This radiology report discusses HISTORY assess for ptx post-chest tube removal REPORT AP sitting view Comparison is made with the prior radiograph dated 22/10/2018. There is interval removal of the left chest tube. The distal tip of the right central venous catheter is projected over the superior vena cava. The heart appears to be enlarged even taking into account the AP projection. There is a small left pleural effusion. There is left mid-zone opacification which may represent early infection which warrants clinical correlation. There is no pneumothorax. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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