# Row 3624

Visit Number: 5d3647c71cb090b282c349988e6babc535f76a76574fabe63a186d56c9660cdb

Masked\_PatientID: 3622

Order ID: 0fffbd26360c01b59010cedf2867d4d8f5125b565090c2a6809f92718b073a72

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 15/1/2018 9:19

Line Num: 1

Text: HISTORY generalized abdo pain and SOB, decreased AE bilaterally. HCC pt/ ESRF REPORT CHEST - AP Previous chest radiograph dated 22 December 2017 was reviewed. Stable cardiomegaly with atherosclerotic mural calcification in the aortic arch and coronary arteries. Partially imaged catheter seen in the right paramidline aspect of the upper abdomen. There is perihilar congestion and areas of air space opacification in the right lower zone with effacement of the rightcostophrenic angle suggestive of a small pleural effusion. Superimposed infecctive cannot be excluded and warrants clinical correlation. May need further action Reported by: <DOCTOR>

Accession Number: efb77bdcb6c36540ce4b8772de24c485e92c396583ecf1eb67560e3bcadf6c4e

Updated Date Time: 15/1/2018 16:44

## Layman Explanation

This radiology report discusses HISTORY generalized abdo pain and SOB, decreased AE bilaterally. HCC pt/ ESRF REPORT CHEST - AP Previous chest radiograph dated 22 December 2017 was reviewed. Stable cardiomegaly with atherosclerotic mural calcification in the aortic arch and coronary arteries. Partially imaged catheter seen in the right paramidline aspect of the upper abdomen. There is perihilar congestion and areas of air space opacification in the right lower zone with effacement of the rightcostophrenic angle suggestive of a small pleural effusion. Superimposed infecctive cannot be excluded and warrants clinical correlation. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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