# Row 3871

Visit Number: 9ddc5eb9bbf9cc78fd2bffb5153c14efa1429c4ade293d968d8aa7c3a21c8a7b

Masked\_PatientID: 3859

Order ID: 3e34ea58cbcc2f7b788e96dedc836183b54a498c3c994ada56cdd40540ec22b0

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 13/6/2019 16:59

Line Num: 1

Text: HISTORY cough with high white cell count REPORT Comparison radiograph dated 18 May 2019. CT dated 20 May 2019 was reviewed. There is reticular nodular density especially in both lower zones with airway thickening, representing fibrotic changes and bronchiectasis. Blunting of bilateral costophrenic angles, most likely due to pleural thickening. Fibrotic changes and scarring is visualised in both mid zones. Airway dilatation in both upper and mid zones also represent bronchiectasis. There is increased density in both lower zones, suspicious for superimposed infective change. Report Indicator: May need further action Finalised by: <DOCTOR>

Accession Number: 5cc9e6eaf526f0d7c65ddee0c509eea706e84016f9bfa3a7c59dbbc97af18e78

Updated Date Time: 14/6/2019 12:31

## Layman Explanation

This radiology report discusses HISTORY cough with high white cell count REPORT Comparison radiograph dated 18 May 2019. CT dated 20 May 2019 was reviewed. There is reticular nodular density especially in both lower zones with airway thickening, representing fibrotic changes and bronchiectasis. Blunting of bilateral costophrenic angles, most likely due to pleural thickening. Fibrotic changes and scarring is visualised in both mid zones. Airway dilatation in both upper and mid zones also represent bronchiectasis. There is increased density in both lower zones, suspicious for superimposed infective change. Report Indicator: May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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