# Row 3991

Visit Number: 26d57aacd0f1a96e5ef6a53db66f36a200d955afa93a744227b05f6f2a568990

Masked\_PatientID: 3988

Order ID: 28d420db1d2350082a4e8f9b9eb9deeb004edf53b47b1fea300a9a4378f53634

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 19/7/2018 7:49

Line Num: 1

Text: HISTORY chest pain REPORT Comparison was made to the previous radiograph dated 13 July 2018. The heart size cannot be accurately assessed in this AP projection. There is unfolding of the thoracic aorta with mural calcification. Increased reticular changes predominantly in the mid and lower zones, possibly related to atelectasis/infective changes. No focal consolidation. Possible small right pleural effusion. Lucencies beneath the right hemidiaphragm are likely related to air within the hepatic flexure (Chilaiditi’s sign) rather than subdiaphragmatic free air. Nevertheless, it would be prudent to correlate clinically for any relevant symptoms. May need further action Reported by: <DOCTOR>

Accession Number: d07beb42f2416bae2318b9f2d6da19ba2d0201f254d91005983451d9dbc8354e

Updated Date Time: 19/7/2018 18:47

## Layman Explanation

This radiology report discusses HISTORY chest pain REPORT Comparison was made to the previous radiograph dated 13 July 2018. The heart size cannot be accurately assessed in this AP projection. There is unfolding of the thoracic aorta with mural calcification. Increased reticular changes predominantly in the mid and lower zones, possibly related to atelectasis/infective changes. No focal consolidation. Possible small right pleural effusion. Lucencies beneath the right hemidiaphragm are likely related to air within the hepatic flexure (Chilaiditi’s sign) rather than subdiaphragmatic free air. Nevertheless, it would be prudent to correlate clinically for any relevant symptoms. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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