# Row 4378

Visit Number: ff32d1b88cb5ba2fe37eecc2604e1dcaf1ceb78e8c24957a0ae5c9e202433c56

Masked\_PatientID: 4295

Order ID: 696c8c163748c1f3e4826eca7ca990cb0ac200cb33791e4caf45e239cb955aba

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 17/8/2018 10:20

Line Num: 1

Text: HISTORY recurrent adm for ccf, p/w sob, orthpnoea REPORT AP SITTING CHEST The prior chest radiograph of 9/8/2018 was reviewed. Midline sternotomy wires are noted. The heart size cannot be accurately assessed on this projection. Intimal calcification of the aortic arch is noted. There is interval increase in size of bilateral pleural effusions, left larger than right. Left retrocardiac opacification is noted. Stable reticulonodular opacities in the right upper zone appear to be of relatively recent onset (not seen on the radiograph of 21/7/2018) and may represent infective change. Pulmonary TB should be excluded. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 1b73f427593ddd8ae6135b4feff1685d213fbd93e8e174e45d84054b974ef5cc

Updated Date Time: 17/8/2018 15:24

## Layman Explanation

This radiology report discusses HISTORY recurrent adm for ccf, p/w sob, orthpnoea REPORT AP SITTING CHEST The prior chest radiograph of 9/8/2018 was reviewed. Midline sternotomy wires are noted. The heart size cannot be accurately assessed on this projection. Intimal calcification of the aortic arch is noted. There is interval increase in size of bilateral pleural effusions, left larger than right. Left retrocardiac opacification is noted. Stable reticulonodular opacities in the right upper zone appear to be of relatively recent onset (not seen on the radiograph of 21/7/2018) and may represent infective change. Pulmonary TB should be excluded. 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.