# Row 4376

Visit Number: 2f41ff6dfe7debf5bb777d55bec4f8b1cf25184eb30ad2f643d0e11ac7b65507

Masked\_PatientID: 4295

Order ID: dbc38d2c3cac25486792cdd704b079728a88dcb364dea45f91477301b6d9f433

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 30/6/2018 20:23

Line Num: 1

Text: HISTORY fluid overload REPORT Chest: A P sitting: Previous radiograph dated 04/06/2018 was reviewed. Midline sternotomy wires and cardiomegaly are again noted. Pulmonary venous congestion is seen with patchy haziness in the leftretrocardiac region which may represent early changes of fluid overload. Clinical correlation is suggested with attention on follow-up. No sizeable pleural effusion. Stable prominence of bilateral hilar vascular shadows and mild fullness in the pulmonary bay raise concern of underlying pulmonary arterial hypertension. Clinical correlation is suggested. May need further action Finalised by: <DOCTOR>

Accession Number: 18f580c2650217fa0ec13c4f5bf39241af6e15a7a66cc67414a1ca4cb8b03131

Updated Date Time: 01/7/2018 11:19

## Layman Explanation

This radiology report discusses HISTORY fluid overload REPORT Chest: A P sitting: Previous radiograph dated 04/06/2018 was reviewed. Midline sternotomy wires and cardiomegaly are again noted. Pulmonary venous congestion is seen with patchy haziness in the leftretrocardiac region which may represent early changes of fluid overload. Clinical correlation is suggested with attention on follow-up. No sizeable pleural effusion. Stable prominence of bilateral hilar vascular shadows and mild fullness in the pulmonary bay raise concern of underlying pulmonary arterial hypertension. Clinical correlation is suggested. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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