# Row 4525

Visit Number: 5c0a9145c08bf80b855a2e2d83fbe9092d91123eee388501e4ed9912101520f9

Masked\_PatientID: 4521

Order ID: 43f85fe943a7473d30b7b54bc39ffa4ad1188172811feca12c8e5160f60eb05c

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 11/5/2016 17:02

Line Num: 1

Text: HISTORY bilateral LL swelling bibasal crepitations REPORT Comparison with prior radiograph dated 29/02/2016. There is suboptimal inspiration. The heart size cannot be accurately assessed on this AP sitting projection. Prominent pulmonary vasculature and blunting of the left costophrenic angle due to small effusion are suggestive of pulmonary venous congestion. Adjacent opacification of the left lower lung zone is again seen and non specific. Underlying infection should be considered in the correct clinical context. There is elevation of the right hemidiaphragm. May need further action Reported by: <DOCTOR>

Accession Number: c1fb3b23a074a18ff9ba764fd22a46274741ec6136d00ca340ecc03ad3109805

Updated Date Time: 12/5/2016 14:48

## Layman Explanation

This radiology report discusses HISTORY bilateral LL swelling bibasal crepitations REPORT Comparison with prior radiograph dated 29/02/2016. There is suboptimal inspiration. The heart size cannot be accurately assessed on this AP sitting projection. Prominent pulmonary vasculature and blunting of the left costophrenic angle due to small effusion are suggestive of pulmonary venous congestion. Adjacent opacification of the left lower lung zone is again seen and non specific. Underlying infection should be considered in the correct clinical context. There is elevation of the right hemidiaphragm. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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