# Row 4909

Visit Number: 667f6cfd9c071597e14b25e5ff318b375d4bf7a8ea826b7fe41f4d91a9b315ed

Masked\_PatientID: 4908

Order ID: 4443f73d39b95bfbc5c0de4593d5725ff1289054897a8683a77c70d24e0b04cc

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 16/10/2017 21:31

Line Num: 1

Text: HISTORY COPD exacerbation. REPORT Comparison was made with previous chest radiograph dated 23 September 2016. AP view. The lungs are hyperinflated with prominent bronchovascular markings. Airspace opacities seen in the right upper zone suggestive of infective change in the clinical context. Clinical correlation is suggested. Stable calcified granuloma is noted in the left apex. No sizable pleural effusion is seen. The thoracic aorta is unfolded with intimal calcifications seen within. The heart size is within normal limits. Degenerative changes are noted in the visualised spine. May need further action Reported by: <DOCTOR>

Accession Number: 4e8951589cf6ae0ecc093e591023d17c8e81fd10f809d44fb2f43385aa29e213

Updated Date Time: 17/10/2017 12:38

## Layman Explanation

This radiology report discusses HISTORY COPD exacerbation. REPORT Comparison was made with previous chest radiograph dated 23 September 2016. AP view. The lungs are hyperinflated with prominent bronchovascular markings. Airspace opacities seen in the right upper zone suggestive of infective change in the clinical context. Clinical correlation is suggested. Stable calcified granuloma is noted in the left apex. No sizable pleural effusion is seen. The thoracic aorta is unfolded with intimal calcifications seen within. The heart size is within normal limits. Degenerative changes are noted in the visualised spine. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

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