# Row 812

Visit Number: b231031005f5811333448f53dd817e471f6110efe7290684d9443ce05550c5ad

Masked\_PatientID: 804

Order ID: 37d82d2977b0795d68a2171a755a585a05bdd1907687b4b5df15529170115a0b

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 09/9/2015 14:26

Line Num: 1

Text: HISTORY hx of ESRF, come in for giddiness REPORT Chest radiograph: AP sitting The previous chest radiograph dated 30 July 2015 was reviewed. The heart size cannot be accurately assessed in this projection. The thoracic aorta is unfolded. There is upper lobe diversion associated with Kerley B lines, suggestive of pulmonary interstitial oedema. No focal consolidation or pleural effusion is seen. May need further action Finalised by: <DOCTOR>

Accession Number: e05acf4fd353d1dee1d459ef25e6bb7a865e5c493178cee87cba88fd48a7b9e4

Updated Date Time: 09/9/2015 18:33

## Layman Explanation

This radiology report discusses HISTORY hx of ESRF, come in for giddiness REPORT Chest radiograph: AP sitting The previous chest radiograph dated 30 July 2015 was reviewed. The heart size cannot be accurately assessed in this projection. The thoracic aorta is unfolded. There is upper lobe diversion associated with Kerley B lines, suggestive of pulmonary interstitial oedema. No focal consolidation or pleural effusion is seen. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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