# Patient ID: 1396, Performed Date: 15/2/2016 12:58

## Raw Radiology Report Extracted

Visit Number: 75b502181004ccd12bdb0bc21dbf82cf8b48c745d5951d8931c88d52f765a737

Masked\_PatientID: 1396

Order ID: 8998eb60c82f0299d7c21a9d6e2cfd66365d95eebf1d4ac2c4191512b0a05b52

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 15/2/2016 12:58

Line Num: 1

Text: HISTORY Coughing for the past 5 days was seen at TTSH 13.2.2015 and advised admission , refuse as daughter wedding on the 14.2.2016 bad cough with basal creps; 1. Epiptic fit 2) IHD/TVD - s/p PCI in RCA for STEMI in 2011 - 2Decho May '11: EF 35% - on aspirin 3) T2DM - Hba1c 5.9% (March 2015) 4) BPH - previously seen in Uro Clinic in Aug 2014, given open date as patient no longer had LUTs 5) Fe deficiency anaemia - possibly contributed by bleeding from tongue biting - referred to Gastro Dr Norwani: patient declined endoscopic evaluation REPORT The heart size is at the upper limit of normal. There is an increase of linear markings in both lungs. This is more obvious than the earlier image of 4 November 2015. The previously noted nodular opacity projected over the anterior end of the right fifth rib shows no change in appearance. There is minor deformity in the axillary segment of the left 4th and 5th ribs. Known / Minor Finalised by: <DOCTOR>

Accession Number: 53040d5984d555cb9d4b7fa64b942fc19937b3318fce73fb1c9048d53c4e013c

Updated Date Time: 15/2/2016 14:16

## Layman Explanation

Error generating summary.

## Summary

Error generating summary.