# Patient ID: 804, Performed Date: 14/4/2016 22:45

## Raw Radiology Report Extracted

Visit Number: bd3ed5f2b81af53d9506b8fdb82720b78f7ec9594c885b2615a0843f3f1a8534

Masked\_PatientID: 804

Order ID: 2f32b933363998e5ad046d474e6944d914cd6f6b3fd505333f430a6db148729c

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 14/4/2016 22:45

Line Num: 1

Text: HISTORY SOB / fluid overload REPORT Chest X-ray: - AP (sitting) The prior radiograph of 06/04/2016 was reviewed. The heart appears enlarged despite AP projection. Mural calcifications are noted in the aortic arch. The upper zone pulmonary vessels appear prominent; the hilar vessels appear indistinct. Fine septal lines are noted in the periphery of the left lung. Mild blunting of the bilateral costophrenic angle suggests the presence of small pleural effusions. Appearances are suggestive of a degree of congestive cardiac failure / fluid overload state. No confluent consolidation is visualised. May need further action Finalised by: <DOCTOR>

Accession Number: 479ed24748733cd8da75e9b5057bc44ab59b9d8ad89e523b0709bc54dc68f312

Updated Date Time: 15/4/2016 11:22

## Layman Explanation

The x-ray shows that your heart looks bigger than it should. There are some calcium deposits in the large blood vessel that comes from your heart (aorta). The blood vessels in the upper part of your lungs look larger than usual, and the blood vessels in the middle part of your lungs are not very clear. There are some thin lines in the outer part of your left lung. There is a small amount of fluid in the space between your lungs and the wall of your chest. These findings suggest that your heart is not working as well as it should and that you may have too much fluid in your body. The x-ray doesn't show any areas of infection in your lungs.

## Summary

## Summary of Radiology Report:  
  
\*\*Image Type:\*\* Chest X-ray (AP - Anterior-Posterior projection, sitting position)  
  
\*\*1. Disease(s):\*\*  
  
\* \*\*Congestive Cardiac Failure / Fluid Overload State:\*\* The report suggests this diagnosis based on the following findings:   
 \* Enlarged heart despite AP projection.  
 \* Prominent upper zone pulmonary vessels.   
 \* Indistinct hilar vessels.  
 \* Fine septal lines in the periphery of the left lung.   
 \* Mild blunting of bilateral costophrenic angles, suggestive of small pleural effusions.  
  
\*\*2. Organ(s):\*\*  
  
\* \*\*Heart:\*\* Appears enlarged.  
\* \*\*Aortic Arch:\*\* Mural calcifications are noted.   
\* \*\*Lungs:\*\*   
 \* Prominent upper zone pulmonary vessels.  
 \* Indistinct hilar vessels.  
 \* Fine septal lines in the periphery of the left lung.   
 \* Mild blunting of bilateral costophrenic angles, suggestive of small pleural effusions.   
  
\*\*3. Symptoms/Phenomenon:\*\*  
  
\* \*\*SOB (Shortness of Breath):\*\* This is mentioned in the patient history.   
\* \*\*Fluid overload:\*\* This is mentioned in the patient history and also suggested as a contributing factor to the findings in the report.  
  
\*\*Additional Information:\*\*  
  
\* \*\*Prior Radiograph:\*\* A previous chest x-ray from 06/04/2016 was reviewed.   
\* \*\*No Confluent Consolidation:\*\* This indicates that no areas of dense lung tissue are observed.   
\* \*\*Further Action May Be Needed:\*\* The report suggests that further action may be required, but does not specify the nature of this action.