# Patient ID: 649, Performed Date: 18/3/2019 17:23

## Raw Radiology Report Extracted

Visit Number: e758a3b8fb715667cd4abe6d08f5924f02668dbe30ba8f8d48f07d357c055035

Masked\_PatientID: 649

Order ID: d6c745fcb1108e8a261d015232ab220805eff576189481725213996062d082b7

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 18/3/2019 17:23

Line Num: 1

Text: HISTORY B13 chest pain for invx REPORT PA view. The prior chest radiograph dated 21 February 2019 is reviewed. Midline sternotomy wires and mediastinal surgical clips are noted, consistent with prior CABG. The cardiac size is within normal limits. There is no consolidation, pleural effusion or pneumothorax. There is no subphrenic free gas. There is no rib fracture identified. Report Indicator: Known \ Minor Reported by: <DOCTOR>

Accession Number: 21990977439d54d2200ce4e9a59a70a4863403637e20fc44c6411a684f823d71

Updated Date Time: 19/3/2019 12:16

## Layman Explanation

The x-ray of your chest shows that your heart is normal size. There are no signs of pneumonia, fluid in your lungs, collapsed lung, air under your diaphragm, or broken ribs.

## Summary

## Radiology Report Summary  
  
\*\*Image Type:\*\* Chest Radiograph (PA view)  
  
\*\*1. Disease(s):\*\* NIL  
  
\*\*2. Organ(s):\*\*  
  
\* \*\*Heart:\*\* Cardiac size is within normal limits.  
\* \*\*Mediastinum:\*\* Midline sternotomy wires and mediastinal surgical clips are noted, consistent with prior CABG (Coronary Artery Bypass Graft).   
\* \*\*Lungs:\*\* No consolidation, pleural effusion, or pneumothorax.   
\* \*\*Pleura:\*\* No pleural effusion.  
\* \*\*Diaphragm:\*\* No subphrenic free gas.  
\* \*\*Ribs:\*\* No rib fracture identified.  
  
\*\*3. Symptoms or Phenomena:\*\*  
  
\* \*\*Chest Pain:\*\* The patient presented with chest pain, but the report does not mention any findings related to the cause of this pain.  
\* \*\*Prior CABG:\*\* The report mentions the presence of surgical clips and sternotomy wires, indicating the patient has undergone a previous CABG procedure.   
  
\*\*Additional Notes:\*\*  
  
\* The report references a prior chest radiograph from 21 February 2019, which was likely reviewed for comparison.  
\* The "Report Indicator" mentions "Known" and "Minor," suggesting the findings are expected and not of major concern.