

History/ Indication

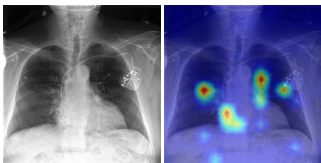
Image

Grad-CAM

Actual Report

Generated Report

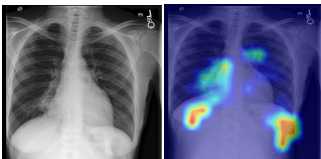
(a) PICC line,
evaluation.



as compared to the previous radiograph, a new right picc line has been inserted. the tip projects over the mid svc. the course is unremarkable. there is no evidence of complication, notably no pneumothorax. otherwise, the radiograph is unchanged.

as compared to the previous radiograph, the patient has received a left pectoral pacemaker. the leads are in correct position. the tip of the catheter projects over the right atrium and the right ventricle. no evidence of complications, notably no pneumothorax. no pleural effusions. borderline size of the cardiac silhouette. no pulmonary edema. no evidence of pneumonia. unchanged appearance of the thoracic aorta.

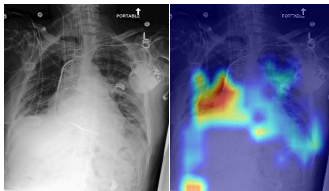
(b) with productive
cough for four
days, low-grade
fever, question
pneumonia.



pa and lateral views of the chest were obtained. there is right middle lobe consolidation involving the medial segment. otherwise, the lungs are clear. no large pleural effusion or pneumothorax. cardiomedastinal silhouette appears normal. bony structures are intact. no free air below the right hemidiaphragm.

pa and lateral views of the chest were obtained. there is a focal opacity in the right lower lobe concerning for pneumonia. elsewhere, lungs are clear. no pleural effusion or pneumothorax is seen. the heart is normal in size. the cardiomedastinal silhouette is normal. bony structures are intact. no free air below the right hemidiaphragm.

(c) with hypoxic
respiratory
failure.



the endotracheal tube tip sits <num> cm above the carina. a right - sided central venous catheter tip sits at the cavoatrial junction. an endogastric tube courses inferiorly below the ge junction. a pacer defibrillator unit projects over the left chest with leads in the right atrium, right ventricle. sternotomy wires, and cabg material are unchanged. the heart size is at the upper limits of normal. the mediastinal contours are within normal limits. the lungs demonstrate stable appearance of interstitial edema, and small bilateral pleural effusions with associated atelectasis are present. there is no pneumothorax.

frontal view of the chest demonstrates interval placement of a right internal jugular central venous catheter with tip in the mid svc. endotracheal tube is in appropriate position, terminating <num> cm above the carina. a left pectoral pacemaker is seen with leads terminating in the right atrium and right ventricle. there is no significant change in cardiomedastinal silhouette and pulmonary edema. small bilateral pleural effusions are noted . there is no pneumothorax.