# Row 13517

Visit Number: fb9c900dc02e80427ea397e66453dc65498e51bef22de288344e93064e5bf0d7

Masked\_PatientID: 13498

Order ID: be14df49b102dc7f88cd83802bdf8f18904f11afcce74538090d77b8786f221d

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 23/9/2016 11:41

Line Num: 1

Text: HISTORY SOB REPORT Chest radiograph: AP sitting The previous chest radiograph dated 8 September 2016 was reviewed. The tip of the nasogastric tube is projected within the right main bronchus. Removal and reinsertion of the tube is advised. The heart is enlarged. The thoracic aorta is unfolded and mural calcifications are seen within it. There is evidence of pulmonary vascular congestion. There is a stable moderate to large right pleural effusion, associatedwith right lower lobe collapse. No new focal consolidation is detected. Lateral neck radiograph No relevant prior study is available for comparison. A nasogastric tube traverses the nasopharynx to enter the trachea. The prevertebralsoft tissue is not thickened. Mild degenerative changes are noted in the cervical spine, as evidenced by vertebral end-plate osteophytes, facet hypertrophy and narrowing of multiple intervertebral spaces. The significant findings were conveyed to Dr Megha Kayal on 23 September 2016 at 5.15pm. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 0fbf871e038e225aa596918525a64aacd5674277372f31dd63b0245c46a40287

Updated Date Time: 23/9/2016 17:25