# Row 5494

Visit Number: a1d41c683df95ecfcee9c3da2a6b705245a844b8a14d85277a90aa41b60b8ce9

Masked\_PatientID: 5481

Order ID: 1ebfc48b904b1f7df86f63bfdb84a6893aa2502fc742e004a26011ac20c8f76e

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 16/1/2017 10:55

Line Num: 1

Text: HISTORY rising inflammatory markers check NGT placement REPORT The prior chest radiograph dated 20/12/2016 was reviewed. A series of chest x-rays have been obtained for checking NGT placement. NG tube tip remains in the distal oesophagus on all the three radiographs and needs further advancement. Endotracheal tube remains in situ. Surgical clips are noted in the right side of the neck. The heart size cannot be assessed on this projection. The thoracic aorta is unfolded. Background changes of pulmonary venous congestion are present. No large consolidation or significant pleural effusion shown. May need further action Finalised by: <DOCTOR>

Accession Number: 3e75b1514e5a330044c03973a50b530f50bcc5a02e9627e332ea0081c4357506

Updated Date Time: 17/1/2017 10:17

## Layman Explanation

This radiology report discusses HISTORY rising inflammatory markers check NGT placement REPORT The prior chest radiograph dated 20/12/2016 was reviewed. A series of chest x-rays have been obtained for checking NGT placement. NG tube tip remains in the distal oesophagus on all the three radiographs and needs further advancement. Endotracheal tube remains in situ. Surgical clips are noted in the right side of the neck. The heart size cannot be assessed on this projection. The thoracic aorta is unfolded. Background changes of pulmonary venous congestion are present. No large consolidation or significant pleural effusion shown. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

No diseases detected.  
No specific organs mentioned.  
No symptoms mentioned.