# Row 5606

Visit Number: 1841bf4c7e6687c450bab2dfff36a798377d82e01b17b84c98de907c0b039359

Masked\_PatientID: 5603

Order ID: 4e34e8ce15066b0d960b21d8bd59819fe10464eef5a518748380e5766a089121

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 26/5/2017 5:22

Line Num: 1

Text: HISTORY TRO fluid overload REPORT Previous chest radiograph dated 25 May 2017 was reviewed. The tracheostomy tube is in satisfactory position relative to the bifurcation. The tip of the nasogastric tube is in good position in the stomach. The heart is of normal size. The thoracic aorta is unfolded with mural calcification. There is mild prominence of the pulmonary vessels suggesting material pulmonary venous congestion. Small bilateral pleural effusions are present. No focal consolidation. Appearances are compatible mild fluid overload. May need further action Finalised by: <DOCTOR>

Accession Number: 5fce791febb7c9ba524239e0652479e74c2700e8b300fa9bec174d2e6879651d

Updated Date Time: 26/5/2017 14:56

## Layman Explanation

This radiology report discusses HISTORY TRO fluid overload REPORT Previous chest radiograph dated 25 May 2017 was reviewed. The tracheostomy tube is in satisfactory position relative to the bifurcation. The tip of the nasogastric tube is in good position in the stomach. The heart is of normal size. The thoracic aorta is unfolded with mural calcification. There is mild prominence of the pulmonary vessels suggesting material pulmonary venous congestion. Small bilateral pleural effusions are present. No focal consolidation. Appearances are compatible mild fluid overload. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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