# Row 6621

Visit Number: 0a8dbd19590a1a39b4088e3aac74b99f8a1aafc432e8820a850858247eb9a3d9

Masked\_PatientID: 6611

Order ID: 08aecd678b236b9d2c05e2e14dd4549d02aeb7a2fa25bf02a96727f56729af0f

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 13/5/2018 9:53

Line Num: 1

Text: HISTORY OST NG INSERTION REPORT CHEST AP - SITTING The chest radiograph of 02/05/2018 was reviewed. There is suboptimal inspiratory effort, limiting assessment of the lung bases. The tip of the feeding tube is projectedbellow the diaphragm, likely within the stomach. The heart size cannot be accurately assessed on the AP projection. The thoracic aorta is unfolded. There is no consolidation. Minimal blunting of the left costophrenic angle may represent a small left pleural effusion. Atelectasis is seen in both lower zones. Known / Minor Finalised by: <DOCTOR>

Accession Number: 709cbf2b2ec17d7d22bdb1992509705812a90068126fb4a97e0fea7a2767accf

Updated Date Time: 13/5/2018 14:43

## Layman Explanation

This radiology report discusses HISTORY OST NG INSERTION REPORT CHEST AP - SITTING The chest radiograph of 02/05/2018 was reviewed. There is suboptimal inspiratory effort, limiting assessment of the lung bases. The tip of the feeding tube is projectedbellow the diaphragm, likely within the stomach. The heart size cannot be accurately assessed on the AP projection. The thoracic aorta is unfolded. There is no consolidation. Minimal blunting of the left costophrenic angle may represent a small left pleural effusion. Atelectasis is seen in both lower zones. Known / Minor Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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