# Row 6958

Visit Number: 9e816b9d4e710ff68d3f98b97e1053f767f955d13e83c44cfd1d9e74c04b6405

Masked\_PatientID: 6945

Order ID: bfa91b0436a60dc1c0eddfdb5dff6db6fb9ebb6b91fcb0ec2385fe31bb822fe6

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 07/11/2015 10:04

Line Num: 1

Text: HISTORY ngt REPORT There is suboptimal inspiratory effort. It is difficult to assess the heart size and lung bases. Sternotomy wires, nasogastric tube , right internal jugular line are noted in situ. The tip of the nasogastric tube is deflected upwards into the lower third of the oesophagus and will need readjustment. Reticular and alveolar shadowing seen in both lungs with pulmonary venous congestion Known / Minor Finalised by: <DOCTOR>

Accession Number: 0b3965b5d3a09f7dd4dac694e35d26f59339749e875e43966cb8b86114d08017

Updated Date Time: 08/11/2015 21:09

## Layman Explanation

This radiology report discusses HISTORY ngt REPORT There is suboptimal inspiratory effort. It is difficult to assess the heart size and lung bases. Sternotomy wires, nasogastric tube , right internal jugular line are noted in situ. The tip of the nasogastric tube is deflected upwards into the lower third of the oesophagus and will need readjustment. Reticular and alveolar shadowing seen in both lungs with pulmonary venous congestion Known / Minor Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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