# Row 7251

Visit Number: afb8f7d78d33b6e528a0c991e7c6daa400df56ad3639eff104aa8986bbf25262

Masked\_PatientID: 7195

Order ID: 6405cfa91674bb7c391e13c342e1a387c6304c6fdc2b0f6b4d96608e63f288a9

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 16/1/2017 16:59

Line Num: 1

Text: HISTORY post cvp vascath and reintubation REPORT Prior CXR dated 9/1/17 was reviewed. The tip of the endotracheal tube is in the origin of the right mainstem bronchus and should be retracted immediately. Tip of the NGT is projected over the proximal stomach and is pointing proximally. Suggest readjusting it such that the tip points distally. Two right-sided central venous catheters (CVC) and one left-sided CVC are seen with their tips in the distal SVC. Tip of the left PICC is projected over the expected location of the left brachiocephalic vein/SVC junction. Status post CABG. Heart size cannot be accurately assessed on this projection. Diffuse air space opacities are seen in both lungs, which appear to have worsened since the last chest radiograph. No pneumothorax or large pleural effusion. Findings were conveyed to Dr Carredo Carlo Kristian Chu by Dr Shawn Kok on 17/1/17 at 1400h and readback performed. Critical Abnormal Finalised by: <DOCTOR>

Accession Number: a746c12fb938e03a9902aaf337a578e763b7a405c3cacf957f0bc009e07f2a57

Updated Date Time: 17/1/2017 14:14

## Layman Explanation

This radiology report discusses HISTORY post cvp vascath and reintubation REPORT Prior CXR dated 9/1/17 was reviewed. The tip of the endotracheal tube is in the origin of the right mainstem bronchus and should be retracted immediately. Tip of the NGT is projected over the proximal stomach and is pointing proximally. Suggest readjusting it such that the tip points distally. Two right-sided central venous catheters (CVC) and one left-sided CVC are seen with their tips in the distal SVC. Tip of the left PICC is projected over the expected location of the left brachiocephalic vein/SVC junction. Status post CABG. Heart size cannot be accurately assessed on this projection. Diffuse air space opacities are seen in both lungs, which appear to have worsened since the last chest radiograph. No pneumothorax or large pleural effusion. Findings were conveyed to Dr Carredo Carlo Kristian Chu by Dr Shawn Kok on 17/1/17 at 1400h and readback performed. Critical Abnormal Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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