# Row 7229

Visit Number: afb8f7d78d33b6e528a0c991e7c6daa400df56ad3639eff104aa8986bbf25262

Masked\_PatientID: 7195

Order ID: a060dd9ff425e898edd3b567f90b8574471b9aaf547e2a6411f90d3f06fca670

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 16/11/2016 23:40

Line Num: 1

Text: HISTORY s/p reintubation REPORT The previous chest radiograph of 7 November 2016 was reviewed. Evidence of previous CABG is noted. The left IJ line, nasogastric tube, mediastinal drain remains stable positions. The endotracheal tube tip is in a satisfactory position. The cardiac size cannot be accurately assessed in this AP supine projection. There is suboptimal inspiration. Bronchial wall thickening is demonstrated in both lungs. The left costophrenic angle iseffaced which may represent a small pleural effusion or consolidation. May need further action Finalised by: <DOCTOR>

Accession Number: 29f65b27facae8da2accffa88def1fa62a325c9aa51325add5e76a5b1aa28dd7

Updated Date Time: 17/11/2016 11:56

## Layman Explanation

This radiology report discusses HISTORY s/p reintubation REPORT The previous chest radiograph of 7 November 2016 was reviewed. Evidence of previous CABG is noted. The left IJ line, nasogastric tube, mediastinal drain remains stable positions. The endotracheal tube tip is in a satisfactory position. The cardiac size cannot be accurately assessed in this AP supine projection. There is suboptimal inspiration. Bronchial wall thickening is demonstrated in both lungs. The left costophrenic angle iseffaced which may represent a small pleural effusion or consolidation. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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