# Row 8910

Visit Number: e36e005a145f53dae62ef4ca5e7d7cefb74da134315ccf4a6d4721b528926086

Masked\_PatientID: 8899

Order ID: e4fc9cbfb8d0079e1c623799fa5dc2236608097bc940bf5e70c5402e7aba7850

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 23/9/2015 7:42

Line Num: 1

Text: HISTORY . post LVAD. reopening. REPORT CHEST (SUPINE MOBILE) TOTAL OF ONE IMAGE There are cardiac monitoring leads in place. The sternotomy wires and staples at the left heart border are compatible with a CABG. The tipof the endotracheal tube is about 4.5 cm above the carina. The tip of the Swan Ganz catheter is projected over the right ventricular outflow tract/main pulmonary artery. The tip of the right central venous line directed towards the periphery in the right subclavian vein and this requires repositioning. The tip of the intra-aortic counter pulsation balloon is projected over the aortic arch and appears to be deflated. The tip of the single electrode pacemaker projected over the right ventricular area. The tip of the nasogastric tube is not visualised in this image. The LVAD is as is. There are bilateral chest drains and a pericardial drain. There are small pneumothoraces at both lung apices and these measure about 8 mm. There is a focal area of air space opacification in the left middle and lower zones. The haziness in the left lower zone may be due to a left basal pleural effusion. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 134eb903a5288ab4fefc111e500014c28742e643059e799b55f75d546259800a

Updated Date Time: 24/9/2015 15:30

## Layman Explanation

This radiology report discusses HISTORY . post LVAD. reopening. REPORT CHEST (SUPINE MOBILE) TOTAL OF ONE IMAGE There are cardiac monitoring leads in place. The sternotomy wires and staples at the left heart border are compatible with a CABG. The tipof the endotracheal tube is about 4.5 cm above the carina. The tip of the Swan Ganz catheter is projected over the right ventricular outflow tract/main pulmonary artery. The tip of the right central venous line directed towards the periphery in the right subclavian vein and this requires repositioning. The tip of the intra-aortic counter pulsation balloon is projected over the aortic arch and appears to be deflated. The tip of the single electrode pacemaker projected over the right ventricular area. The tip of the nasogastric tube is not visualised in this image. The LVAD is as is. There are bilateral chest drains and a pericardial drain. There are small pneumothoraces at both lung apices and these measure about 8 mm. There is a focal area of air space opacification in the left middle and lower zones. The haziness in the left lower zone may be due to a left basal pleural effusion. Further action or early intervention required Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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