# Row 9350

Visit Number: b5f1d6a89ac73c4812a0492ab63e2b404ec7321dabd50d3ffda36126d476823f

Masked\_PatientID: 9343

Order ID: a0fd5722ab6e7b0f04956e729faf2a43f357bb31e7a8f1e1b710850fbb211172

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 29/4/2016 18:53

Line Num: 1

Text: HISTORY SOB REPORT Mobile radiograph chest supine. Prior radiograph dated 20/04/2016 was reviewed. The extensive air space opacities are noted predominantly in the central location and on the right side suspicious for infection or pulmonary oedema. The patient is intubated with tip at the level of the clavicular heads. The IABP marker is noted at the level of the aortic knuckle. The tip of the feeding tube is satisfactory. Left chest wall single lead AICD is again seen. May need further action Finalised by: <DOCTOR>

Accession Number: d88f2a3a9f527ec2477fad6ba1723f6221db79cb3b15c6a92daa5ec202946fc4

Updated Date Time: 01/5/2016 16:58

## Layman Explanation

This radiology report discusses HISTORY SOB REPORT Mobile radiograph chest supine. Prior radiograph dated 20/04/2016 was reviewed. The extensive air space opacities are noted predominantly in the central location and on the right side suspicious for infection or pulmonary oedema. The patient is intubated with tip at the level of the clavicular heads. The IABP marker is noted at the level of the aortic knuckle. The tip of the feeding tube is satisfactory. Left chest wall single lead AICD is again seen. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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