# Row 1955

Visit Number: a9eae9e586345d37f20e3efa16f80be43aadd8baf9df42d8018b5a5fea35a816

Masked\_PatientID: 1950

Order ID: 6c534f7fa0e4ce8e6e062f302a22f9482ac2673ac4ead36987711f0a42fb6be9

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 21/12/2016 6:45

Line Num: 1

Text: HISTORY Intubated and IABP REPORT Previous radiograph dated 20 December 2016 was reviewed. The endotracheal tube is in satisfactory position relative to the bifurcation. The IABP is unchanged in position. The tip of the feedingtube is in the proximal stomach and further advancement may be prudent. Mild pulmonary venous congestion is present. There is no confluent consolidation or a significant pleural effusion. Cardiomegaly is seen. A left-sided coronary stent is in situ. May need further action Finalised by: <DOCTOR>

Accession Number: aae11cbc40b293230088570af9637add034d016c543ea75bd6b57065958d550a

Updated Date Time: 21/12/2016 9:52

## Layman Explanation

This radiology report discusses HISTORY Intubated and IABP REPORT Previous radiograph dated 20 December 2016 was reviewed. The endotracheal tube is in satisfactory position relative to the bifurcation. The IABP is unchanged in position. The tip of the feedingtube is in the proximal stomach and further advancement may be prudent. Mild pulmonary venous congestion is present. There is no confluent consolidation or a significant pleural effusion. Cardiomegaly is seen. A left-sided coronary stent is in situ. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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