# Row 4539

Visit Number: 09aab06dce7d9c80921fdd97e60c6179a7734a38e02def71b17d3903dfde18a4

Masked\_PatientID: 4534

Order ID: 92e7000e58eddd43fd6d986fe85e46aee822c174ff7e293adde7dd92795a51c1

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 22/1/2017 20:36

Line Num: 1

Text: HISTORY fluid overload REPORT The prior radiograph dated 31/12/2016 was reviewed. The endotracheal tube tip is projected 3 cm from the carina. NG tube tip lies below the hemidiaphragm but beyond the inferior margin of the film. Right-sided central line tip is projected over the distal SVC. The heart appears enlarged, despite AP projection. There is interval worsening of the bilateral perihilar and diffuse shadowing in keeping with worsening fluid overload. No large pleural effusion shown. Status post left mastectomy. May need further action Finalised by: <DOCTOR>

Accession Number: c195943483b51c63bf4bcf836773e6528466ee3b8bc9d339794cf89774b534f0

Updated Date Time: 23/1/2017 17:54

## Layman Explanation

This radiology report discusses HISTORY fluid overload REPORT The prior radiograph dated 31/12/2016 was reviewed. The endotracheal tube tip is projected 3 cm from the carina. NG tube tip lies below the hemidiaphragm but beyond the inferior margin of the film. Right-sided central line tip is projected over the distal SVC. The heart appears enlarged, despite AP projection. There is interval worsening of the bilateral perihilar and diffuse shadowing in keeping with worsening fluid overload. No large pleural effusion shown. Status post left mastectomy. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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