# Row 738

Visit Number: 6cc2ee0231caa4501d68fea84bc33e13335a1e02f7a90d17ad868bed45d4e9b0

Masked\_PatientID: 735

Order ID: b9653e5ba2ee5497d344ee0adcbad48536c9933f44bdd33e80a21fedb2f0518e

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 09/2/2016 17:58

Line Num: 1

Text: HISTORY Post Intubation REPORT Chest X-ray: - AP (supine) The prior radiograph of 09/02/2016 performed at 05:21 p.m. was reviewed. Interval insertion of an endotracheal tube is noted, its tip is projected 3cm above the carina. Reticulonodular shadowing involving all zones of the bilateral lungs, with consolidation in the left lower and right mid zone is again seen. The left costophrenic angle is obscured. Appearances have mildly worsened from the prior radiograph.The heart size cannot be accurately assessed on this supine projection. Mural calcifications are noted in the aortic arch. May need further action Finalised by: <DOCTOR>

Accession Number: 05929ee4d1985ad6c617bf667f9ca82bd4736ef6781b151f5fa21fe92e58824f

Updated Date Time: 10/2/2016 17:03

## Layman Explanation

This radiology report discusses HISTORY Post Intubation REPORT Chest X-ray: - AP (supine) The prior radiograph of 09/02/2016 performed at 05:21 p.m. was reviewed. Interval insertion of an endotracheal tube is noted, its tip is projected 3cm above the carina. Reticulonodular shadowing involving all zones of the bilateral lungs, with consolidation in the left lower and right mid zone is again seen. The left costophrenic angle is obscured. Appearances have mildly worsened from the prior radiograph.The heart size cannot be accurately assessed on this supine projection. Mural calcifications are noted in the aortic arch. May need further action Finalised by: <DOCTOR>. In simpler terms, this means...

## Summary

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