# Row 226

Visit Number: f543a45f712f6ab4cecefed34a39f2245915b5262d964d20c09f02db6fb21e34

Masked\_PatientID: 218

Order ID: 826136ce172cb3ca3fd1fcfe8aa098fa98891d916148d34022b91d03cb0a2b83

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 06/4/2019 11:34

Line Num: 1

Text: HISTORY hypotensive REPORT Comparison is made with radiograph dated 18 May 2016. The patient is rotated. Tracheostomy is in situ. The feeding tube crosses the diaphragm but its tip is beyond inferior margin of this film. No focal consolidation or large pleural effusion is detected. The heart is enlarged. The thoracic aorta is unfolded and demonstrates mural calcification. No free gas is detected under the diaphragm. Curvilinear densities in the upper abdomen probably represent surgical sutures. Report Indicator: Known \ Minor Finalised by: <DOCTOR>

Accession Number: 96eca9645ff52d30a3a6451382eeedce84e73989d405917e98282596bc3b06ef

Updated Date Time: 07/4/2019 8:18

## Layman Explanation

The images were compared to a previous one from May 18, 2016. The patient's body was slightly turned in this image. The breathing tube is in place. The feeding tube goes through the diaphragm (muscle separating the chest and abdomen) but the end of the tube is not visible on this image. The heart appears larger than normal. The large blood vessel in the chest (aorta) is slightly stretched and has some calcium deposits on its wall. There is no air trapped in the abdomen. Some curved lines in the upper abdomen are likely surgical stitches.

## Summary

Error generating summary.