# Patient ID: 1189, Performed Date: 28/2/2016 12:01

## Raw Radiology Report Extracted

Visit Number: 4da07f09ae462e01861399d23b49c5118eae25139b1f926b55f8123e692a45f6

Masked\_PatientID: 1189

Order ID: 43e960d4edd5ba8b0ada8dd99f647fc0859eb6b3a83e97e98fcfa99428f57022

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 28/2/2016 12:01

Line Num: 1

Text: HISTORY SEPSIS REPORT Comparison made previous radiograph dated 26 February 2016. Position of the ETT is unchanged at the level of the clavicular medial ends. A feeding tube is seen with its tip projected beyond the diaphragms but extruded from the radiographic view. Sternotomy wires are present. Heart size cannot be accurately assessed on this projection. Interval worsening of bilateral airspace opacification, worse on the right. No sizable pleural effusion is seen. May need further action Finalised by: <DOCTOR>

Accession Number: bc92349d515b95015846c6e804cacdf0cc5c1370607f37c974ba4ab3234d71a1

Updated Date Time: 29/2/2016 16:03

## Layman Explanation

The images show that the breathing tube is in the same place as before. The feeding tube is in place but does not show completely on the image. There are wires from a past chest surgery. The size of the heart cannot be seen clearly on these images. There is more cloudiness in both lungs, worse on the right side. No large amount of fluid is seen around the lungs.

## Summary

\*\*Image Type:\*\* Chest X-ray  
  
\*\*Summary:\*\*  
  
1. \*\*Disease(s):\*\* Sepsis is mentioned in the history section. The report also mentions "interval worsening of bilateral airspace opacification, worse on the right", which may indicate pneumonia or another inflammatory lung condition.   
2. \*\*Organ(s):\*\* The report mentions the following organs:  
 \* \*\*Lungs:\*\* Bilateral airspace opacification, worse on the right.  
 \* \*\*Heart:\*\* Size cannot be accurately assessed.   
 \* \*\*Diaphragm:\*\* Feeding tube tip is projected beyond it.  
3. \*\*Symptoms/Phenomena:\*\*  
 \* \*\*Worsening of lung opacification:\*\* This indicates worsening of the patient's lung condition since the previous radiograph.  
 \* \*\*Feeding tube extrusion:\*\* The feeding tube is seen beyond the diaphragm but is partially outside the radiographic view. This may indicate a potential problem with tube placement or function.   
 \* \*\*Sternotomy wires:\*\* This suggests a previous surgical procedure involving opening of the chest.