# Patient ID: 3683, Performed Date: 11/5/2015 14:45

## Raw Radiology Report Extracted

Visit Number: 3838cb83a6e2cb4f89bc868d4dc9e79310f54941d4d07f8cab10d1651eb3534a

Masked\_PatientID: 3683

Order ID: e2dc169a513b6dd6820583533f5fa6deeac7c4225f7120ab0c411c1ecf693a4e

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 11/5/2015 14:45

Line Num: 1

Text: HISTORY post CABG REPORT Reference is made to previous radiograph of 9 May 2015. Median sternotomy wires are indicative of prior cardiothoracic surgery. Bilateral chest tubes in situ. There is no pneumothorax. Right CVC tip lies in the innominate vessel most likely. The cardiomediastinal silhouette cannot be accurately assessed on this projection. Tip of the nasogastric tube lies in the proximal stomach. It is close to the gastro-oesophageal junction and further advancement should be considered. Subtle consolidation is present in the left lower zone. There are possibly small bilateral pleural effusions. Fibronodular scarring in both upper zones are stable. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: af59201bb6a68509aa5b39d3fd999ebc5bd852d4307a541db18a257193e595fb

Updated Date Time: 12/5/2015 12:23

## Layman Explanation

Error generating summary.

## Summary

Error generating summary.