# Patient ID: 1312, Performed Date: 09/9/2016 16:42

## Raw Radiology Report Extracted

Visit Number: 84cfff556fb7c03ddabbfa1d54eac30ea75666be9d98e77afbc7f3441068e6ba

Masked\_PatientID: 1312

Order ID: 63a1c859ab04c55d1e63fd6314f0d46051dcb2d24dea36fadc09ac2c7739de19

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 09/9/2016 16:42

Line Num: 1

Text: HISTORY . NGT re inserted. REPORT CHEST (SUPINE MOBILE) TOTAL OF ONE IMAGE The sternotomy wires and staples at the left heart border are compatible with a CABG. The tip of the nasogastric tube is projected over the leftside of the T11 vertebra and this is in the lower end of the oesophagus. Therefore readjustment and repositioning of the tube tip in the stomach is advised. The heart shadow and mediastinum cannot be assessed for size and configuration. The lungs show neither congestion nor consolidation. Both lateral costophrenic angles appear to be satisfactory. May need further action Finalised by: <DOCTOR>

Accession Number: 7d7bbe3f13ab07680879474ac90eb6e033daced9afdf46806acbf76d2d620399

Updated Date Time: 13/9/2016 17:37

## Layman Explanation

The images show that the feeding tube (nasogastric tube) is in the lower part of the food pipe (esophagus) and not in the stomach. This means it needs to be moved to the correct position in the stomach. The images are not clear enough to tell the size and shape of the heart and its surrounding area. The lungs look normal without any signs of fluid buildup or infection.

## Summary

## Analysis of Radiology Report  
  
\*\*Image Type:\*\* Chest X-ray (Supine Mobile)  
  
\*\*1. Diseases:\*\* NIL  
  
\*\*2. Organs:\*\*  
  
\* \*\*Heart:\*\* The report mentions the presence of sternotomy wires and staples at the left heart border, compatible with a Coronary Artery Bypass Graft (CABG). However, the heart size and configuration cannot be assessed due to the imaging limitations.  
\* \*\*Lungs:\*\* The lungs show no signs of congestion or consolidation. Both lateral costophrenic angles appear satisfactory.  
\* \*\*Esophagus:\*\* The tip of the nasogastric tube is projected over the left side of the T11 vertebra, indicating its position in the lower end of the esophagus.  
  
\*\*3. Symptoms/Phenomenon:\*\*  
  
\* \*\*Nasogastric tube positioning:\*\* The nasogastric tube is not positioned correctly in the stomach. Readjustment and repositioning are advised.  
\* \*\*Limited Assessment:\*\* The heart shadow and mediastinum cannot be assessed due to the imaging limitations of the supine mobile chest X-ray.   
  
\*\*Summary:\*\*  
  
The chest X-ray shows the presence of sternotomy wires and staples compatible with a previous CABG. The nasogastric tube is malpositioned in the lower esophagus and requires readjustment. The lungs appear normal. However, the heart size and mediastinum cannot be adequately assessed due to the image limitations. Further investigation may be needed.