# Patient ID: 269, Performed Date: 10/8/2016 5:40

## Raw Radiology Report Extracted

Visit Number: f91bc1d4b707acc56774e44af8c7c1f887f25af2b7251524680229e5ac15efd5

Masked\_PatientID: 269

Order ID: 8439143056a56baac4793016bba7d36c424f0ea8fa3ba449274fc3bbb70ac9b5

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 10/8/2016 5:40

Line Num: 1

Text: HISTORY SOB REPORT Chest X-ray: mobile supine Comparison is made with the prior radiograph dated 08/08/2016. The endotracheal tube has been removed. The nasogastric tube is withdrawn proximally and the tip now lies in the region of the gastro-oesophageal junction. This should be further advanced. The heart size and mediastinal contours are within normal limits. There is right lower lobe atelectasis which is unchanged. This may be aspiration for infection. The lungs are otherwise clear. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: f59ac8c03f5be8995da09d8e00ce954c3532af4ffad2c34ccfda9f88f6f362bd

Updated Date Time: 10/8/2016 17:12

## Layman Explanation

The X-ray shows that the breathing tube has been removed. The feeding tube has been moved up a little and needs to be moved further down. The heart and surrounding tissues look normal. There is a collapsed area in the lower right lung, which is the same as before. This could be from something being breathed in or an infection. The rest of the lungs look normal.

## Summary

## Radiology Report Summary  
  
\*\*Image Type:\*\* Chest X-ray  
  
\*\*1. Diseases Mentioned:\*\*  
  
\* \*\*Right lower lobe atelectasis:\*\* This is mentioned as unchanged from a previous radiograph. The report suggests this could be due to aspiration or infection.   
  
\*\*2. Organs Mentioned:\*\*  
  
\* \*\*Lungs:\*\* The right lower lobe shows atelectasis, otherwise the lungs are clear.   
\* \*\*Heart:\*\* The heart size is within normal limits.  
\* \*\*Mediastinum:\*\* The mediastinal contours are within normal limits.  
\* \*\*Gastro-oesophageal junction:\*\* The nasogastric tube tip lies in this region.  
  
\*\*3. Symptoms or Phenomena of Concern:\*\*  
  
\* \*\*SOB (Shortness of breath):\*\* This is mentioned in the history section, suggesting a potential reason for the chest X-ray.   
\* \*\*Right lower lobe atelectasis:\*\* This is a collapse or incomplete expansion of lung tissue, which can be caused by aspiration or infection. The report mentions that it is unchanged, implying it may be a pre-existing condition or not improving.  
\* \*\*Nasogastric tube position:\*\* The report states the nasogastric tube is withdrawn proximally and should be further advanced. This could be related to the patient's current condition or treatment plan.   
  
\*\*Further action or early intervention is required.\*\* This suggests that the findings of the chest x-ray necessitate further investigation or treatment.