# Comparison Report for Patient ID: 1

## Document Paths

Old Report: C:/Users/User/OneDrive - National University of Singapore/Desktop/NUS/upip/Synapxe/multi-doc/gemini\_llm/pre\_processing/Processed Data\_attempt2/1/PatientID\_1\_09-2-2015 15-50.docx

New Report: C:/Users/User/OneDrive - National University of Singapore/Desktop/NUS/upip/Synapxe/multi-doc/gemini\_llm/pre\_processing/Processed Data\_attempt2/1/PatientID\_1\_10-2-2015 9-52.docx

## Comparison Results

## Comparing Radiology Reports  
  
Here's a breakdown of the differences and new developments between the old and new reports:  
  
\*\*1. Diseases Mentioned:\*\*  
  
\*\*New Report:\*\* NIL  
  
\*\*Old Report:\*\*  
  
\* \*\*Atelectasis:\*\* Mentioned as "possible underlying subsegmental atelectasis".  
\* \*\*Consolidation:\*\* Mentioned as "consolidation".  
  
\*\*Categorization:\*\* \*\*Difference\*\* in reporting style and potentially in the level of certainty about diagnoses.

\*\*Reason:\*\* The new report does not explicitly mention any specific diagnoses. While it describes changes like "patchy air space shadowing" and "consolidation", it refrains from assigning specific disease labels. This could be due to the radiologist preferring to describe the findings objectively rather than making definitive diagnoses.  
  
  
\*\*2. Organs Mentioned:\*\*  
  
\*\*New Report:\*\*  
  
\* \*\*Heart:\*\* Difficult to assess size due to AP projection.  
\* \*\*Lungs:\*\*   
 \* \*\*Left lung base:\*\* Patchy air space shadowing shows interval increase compared to previous film.  
 \* \*\*Right lung:\*\* Patch of consolidation seen in the right para cardiac region.  
\* \*\*Left Pleural Space:\*\* Small left basal effusion present.  
\* \*\*Vascular Structures:\*\*  
 \* \*\*Central Venous Catheter (CVP) line:\*\* Tip projected over distal innominate/proximal superior vena cava.  
 \* \*\*Left Chest Tube:\*\* Tip projected over the left mid zone.  
  
\*\*Old Report:\*\*  
  
\* \*\*Heart:\*\* Cannot be accurately assessed but appears prominent.  
\* \*\*Lungs:\*\* Right lung is unremarkable, left lung shows signs of possible atelectasis and consolidation.  
\* \*\*Pleura:\*\* Left pleural effusion, no right pleural effusion.  
  
\*\*Reason:\*\* The new report provides more detailed information about the position of the tubes and a more specific description of the lung findings. It mentions the right lung explicitly, whereas the old report only mentions the left lung.   
  
\*\*Categorization:\*\*   
  
\* \*\*New Development:\*\* The mention of consolidation in the right para cardiac region is new and suggests a potential development since the previous exam.  
\* \*\*Difference:\*\* The new report is more detailed in describing the position of the CVP line and chest tube. The new report specifically mentions the AP projection, which influences the ability to assess the heart size.   
  
\*\*3. Symptoms or Phenomena of Concern:\*\*  
  
\*\*New Report:\*\*  
  
\* \*\*Interval increase in patchy air space shadowing in the left lung base:\*\* Suggests worsening of a previous condition.  
\* \*\*Patch of consolidation in the right para cardiac region:\*\* Suggests a new area of inflammation or fluid buildup in the right lung.  
\* \*\*Small left basal effusion:\*\* Indicates fluid accumulation in the left pleural space.  
  
\*\*Old Report:\*\*  
  
\* \*\*Left pleural effusion:\*\* Suggests fluid buildup in the left side of the chest.  
\* \*\*Possible subsegmental atelectasis and consolidation:\*\* Indicates a potential issue with the left lung.  
\* \*\*Prominent heart:\*\* Suggests the possibility of an enlarged heart.  
  
\*\*Reason:\*\* The new report describes the change in the left lung as an "interval increase" compared to the previous film. This strongly suggests progression of a previous condition. The new report also mentions a "patch of consolidation" in the right lung, which is not mentioned in the previous report. This suggests a new development since the last exam.  
  
\*\*Categorization:\*\*  
  
\* \*\*New Development:\*\* The increase in patchy air space shadowing and the new patch of consolidation in the right lung.  
\* \*\*Difference:\*\* The new report provides a more specific location for the pleural effusion ("left basal").  
  
\*\*Conclusion:\*\*  
  
The new report suggests a possible progression of the left lung issue and a new development in the right lung. The report also provides more detailed information about the patient's tubes and positioning, which is important for monitoring their condition. Further investigation and clinical evaluation are likely needed based on these new findings.