# 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

### Section: Diseases Mentioned

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| Category | Old Report Content | New Report Content | Explanation |
| New Development | Atelectasis: possible underlying subsegmental atelectasis | NIL | The new report does not explicitly mention atelectasis. However, the mention of "interval increase in patchy air space shadowing in the left lung base" could imply worsening atelectasis based on the context of the previous report. |
| New Development | Consolidation: consolidation | NIL | The new report does not explicitly mention consolidation, but the phrase "patch of consolidation now seen in the right para cardiac region" indicates a new finding. |

### Section: Organs Mentioned

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| Category | Old Report Content | New Report Content | Explanation |
| Difference | Heart: The heart size cannot be accurately assessed in this projection but appears prominent. | Heart: It is difficult to accurately assess the cardiac size as this is an AP projection. | While both reports acknowledge difficulty in assessing the heart size, the new report specifies the reason as being an AP projection. |
| New Development | Lungs: The right lung is unremarkable. | Lungs: Right lung: Patch of consolidation seen in the right para cardiac region. | The new report identifies a new finding of consolidation in the right lung, which was previously described as "unremarkable." |
| **Difference** | Lungs: Small left pleural effusion noted associated with possible underlying subsegmental atelectasis and consolidation. | Lungs: Left lung base: Patchy air space shadowing shows **interval increase** compared to previous film. | While the new report acknowledges the left pleural effusion, it describes the changes in the left lung base using different terminology, likely due to variations in reporting style. |
| New Development | Pleura: No **right** pleural effusion seen. | **Left** Pleural Space: Small left basal effusion present. | The new report includes a mention of a small left basal effusion, which wasn't explicitly stated in the old report. |
| New Development | NIL | Vascular Structures: Central Venous Catheter (CVP) line: Tip projected over distal innominate/proximal superior vena cava. | The new report provides information on the position of the CVP line, which was not included in the old report. |
| New Development | NIL | Vascular Structures: Left Chest Tube: Tip projected over the left mid zone. | The new report provides information on the position of the left chest tube, which was not included in the old report. |

### Section: Symptoms/Phenomena of Concern

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| Category | Old Report Content | New Report Content | Explanation |
| New Development | Left pleural effusion | Interval increase in patchy air space shadowing in the left lung base | The new report mentions the interval increase in air space shadowing, likely indicating progression of the previously mentioned left pleural effusion. |
| New Development | Possible subsegmental atelectasis and consolidation | Patch of consolidation in the right para cardiac region | The new report highlights a new area of consolidation in the right lung, which wasn't previously reported. |
| Difference | Prominent heart | NIL | The new report does not explicitly mention the heart being "prominent" but focuses on the difficulty in assessing its size. |
| New Development | NIL | Small left basal effusion | The new report provides a more specific description of the left pleural effusion, mentioning its location in the basal region. |
| New Development | NIL | No overt pneumothorax | The new report explicitly states that there is no pneumothorax, a finding not reported in the previous report. |