# Patient ID: 123, Performed Date: 05/6/2015 23:09

## Raw Radiology Report Extracted

Visit Number: 7fab12fd2214c6b5a567ae24dd377ec02f103406da8600bef2bb3981cd061469

Masked\_PatientID: 123

Order ID: f12e53d68548d6564258bbae650f261520f267dd77bdc2148d854ec6bc43d7a7

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 05/6/2015 23:09

Line Num: 1

Text: HISTORY fluid overload - reasses post HD REPORT There is suboptimal inspiratory effort. It is difficult to assess the heart size and lung bases. There are bilateral pleural effusions - stable as compared to previous radiograph A left central venous catheter is observed with the tip in the right atrium. There is pulmonary venous congestion. Ground-glass and alveolar shadowing is seen in both lower zones Known / Minor Finalised by: <DOCTOR>

Accession Number: 58b7eb4aff487c41d95dd0806765df1b9a8e49750017c318a81c369c961e667b

Updated Date Time: 08/6/2015 11:03

## Layman Explanation

The images show that your lungs are not expanding fully when you breathe in. It's hard to tell how big your heart is and what's happening at the bottom of your lungs. There is fluid in both sides of the space surrounding your lungs, but it hasn't changed much since the last time you had this test. The tube in your left chest (central venous catheter) is in the right side of your heart. The blood vessels in your lungs appear to be congested. There are areas of inflammation in both of your lower lungs.

## Summary

The text is extracted from a \*\*chest x-ray\*\* report.  
  
Here is a summary based on the guiding questions:  
  
\*\*1. Diseases mentioned:\*\*  
  
\* \*\*Fluid overload:\*\* This is mentioned in the history section but not directly addressed in the findings.  
\* \*\*Pulmonary venous congestion:\*\* This is mentioned as a finding.   
\* \*\*Bilateral pleural effusions:\*\* This is mentioned as a finding, described as "stable as compared to previous radiograph."   
  
\*\*2. Organs mentioned:\*\*  
  
\* \*\*Heart:\*\* The report states it is "difficult to assess the heart size."  
\* \*\*Lungs:\*\* The report mentions "suboptimal inspiratory effort," "difficult to assess... lung bases," "bilateral pleural effusions," "pulmonary venous congestion," and "ground-glass and alveolar shadowing in both lower zones."   
\* \*\*Right Atrium:\*\* A left central venous catheter is observed with the tip in the right atrium.   
  
\*\*3. Symptoms or phenomenon that would cause attention:\*\*  
  
\* \*\*Suboptimal inspiratory effort:\*\* This indicates the patient may not be able to take a full breath for the x-ray, which can impact the quality of the image.   
\* \*\*Difficulty assessing heart size and lung bases:\*\* This suggests potential limitations in interpreting the x-ray due to factors like poor image quality or the presence of other abnormalities.   
\* \*\*Bilateral pleural effusions:\*\* This indicates fluid buildup around the lungs, which can be a sign of various conditions. The fact that they are "stable" suggests they haven't worsened since the previous x-ray.  
\* \*\*Pulmonary venous congestion:\*\* This indicates a backup of blood in the veins leading to the lungs, which can be a sign of heart failure or other conditions.  
\* \*\*Ground-glass and alveolar shadowing in both lower zones:\*\* These findings suggest areas of lung inflammation or fluid buildup, which can be caused by various conditions like pneumonia or infection.