# Patient ID: 1440, Performed Date: 01/12/2016 18:20

## Raw Radiology Report Extracted

Visit Number: eeadd9fe07aa6e8f678d7eb6fd979a86652136856e8cbd7fc846fd3bdc2ee5e7

Masked\_PatientID: 1440

Order ID: ea1a034ae1b64b1679e42e8aeab360122ebae409aa02b37cdec1ee548ff9423b

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 01/12/2016 18:20

Line Num: 1

Text: HISTORY desat REPORT AP SITTING The chest radiograph (20 November 2016) and CT Chest (25 November 2016) were reviewed. Heart size cannot be accurately assessed in AP projection. Bilateral perihilar and lower zone consolidations with prominent pulmonary vasculature is noted, together with bilateral pleural effusions. Features are compatible with pulmonary oedema. Degenerative changes are noted in the thoracolumbar spine. May need further action Reported by: <DOCTOR>

Accession Number: 29cf0626032393f451d29df6a34b4e9f4bf5bc30e3f18da0dcbb4ec22065befb

Updated Date Time: 02/12/2016 12:01

## Layman Explanation

The chest X-ray and CT scan show fluid buildup in the lungs (pulmonary edema). This may be due to problems with the heart. There are also signs of wear and tear in the spine.

## Summary

\*\*Image type:\*\* Chest radiograph and CT Chest  
  
\*\*Summary:\*\*  
  
\*\*1. Disease:\*\* Pulmonary edema  
  
\*\*Elaboration:\*\* Bilateral perihilar and lower zone consolidations with prominent pulmonary vasculature and bilateral pleural effusions are noted, features compatible with pulmonary edema.  
  
\*\*2. Organs:\*\*   
\* \*\*Heart:\*\* Size cannot be accurately assessed in AP projection.   
\* \*\*Lungs:\*\* Bilateral perihilar and lower zone consolidations, prominent pulmonary vasculature, bilateral pleural effusions.  
\* \*\*Thoracic spine:\*\* Degenerative changes.  
  
\*\*3. Symptoms/Phenomenon:\*\*   
\* \*\*Desaturation:\*\* This is mentioned in the history, suggesting the patient may have been experiencing low oxygen levels.  
\* \*\*Consolidation:\*\* This indicates fluid buildup in the lungs, a hallmark of pulmonary edema.  
\* \*\*Prominent pulmonary vasculature:\*\* This can be a sign of increased pressure in the pulmonary arteries, which can be associated with pulmonary edema.  
\* \*\*Pleural effusions:\*\* This indicates fluid buildup in the space between the lungs and the chest wall, another sign of pulmonary edema.  
\* \*\*Degenerative changes in the thoracolumbar spine:\*\* This is a separate finding unrelated to the pulmonary edema, but is mentioned in the report.