# Patient ID: 1787, Performed Date: 23/2/2017 14:25

## Raw Radiology Report Extracted

Visit Number: b53ba9972d6bc5ab45c873a44ac10d1b22e43022ae0750149213338bcd93f520

Masked\_PatientID: 1787

Order ID: 5717b16efe1927e64538c56b3337c457e717ddee2cccb53f4b1dc5e68061821f

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 23/2/2017 14:25

Line Num: 1

Text: HISTORY RML BAL MPO vasculitis vs RPGN REPORT AP sitting. Heart size cannot be accurately assessed. Continued elevation of the right hemidiaphragm with loss of right lung volume with mid to lower zone atelectasis. The left lung is grossly clear. May need further action Finalised by: <DOCTOR>

Accession Number: 228bd72babae2764b71c4d2bb83b2652241cd1ccc667f9e0d612a2a9a97b5693

Updated Date Time: 24/2/2017 12:16

## Layman Explanation

The X-ray shows that the right side of the lung is smaller than normal and collapsed in the middle and lower areas. The left lung appears to be normal. The size of the heart cannot be determined from this image.

## Summary

## Radiology Report Summary  
  
\*\*Image Type:\*\* Chest X-ray (AP sitting)  
  
\*\*1. Diseases:\*\*  
  
\* \*\*MPO vasculitis\*\* - Mentioned in the history section, but no further elaboration on its presence or absence is found in the report.  
\* \*\*RPGN (Rapidly Progressive Glomerulonephritis)\*\* - Mentioned in the history section, but no further elaboration on its presence or absence is found in the report.  
  
\*\*2. Organs:\*\*  
  
\* \*\*Heart:\*\* Size cannot be accurately assessed.  
\* \*\*Right Lung:\*\*   
 \* Continued elevation of the right hemidiaphragm.  
 \* Loss of right lung volume.  
 \* Mid to lower zone atelectasis.  
\* \*\*Left Lung:\*\* Grossly clear.  
  
\*\*3. Symptoms/Phenomenon of Concern:\*\*  
  
\* \*\*Right hemidiaphragm elevation:\*\* Suggests potential right lung collapse or compression.  
\* \*\*Loss of right lung volume:\*\* Further supports the possibility of right lung collapse or compression.  
\* \*\*Mid to lower zone atelectasis:\*\* Indicates collapse or airless areas in the right lung.  
  
\*\*Additional Note:\*\*   
The report mentions the possibility of "further action" being needed. This suggests that the findings on the chest x-ray warrant further investigation and may be related to the patient's history of MPO vasculitis or RPGN.