# Patient ID: 1839, Performed Date: 23/1/2020 15:52

## Raw Radiology Report Extracted

Visit Number: a5b6ff4614ade8918579d07accf1a5716703179cb379e6e2883e2f6f96be18e3

Masked\_PatientID: 1839

Order ID: 186cd832de74b7a6f5a2772103ec1a4d44a72e9771f547404c8fc25b6e3ec44f

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 23/1/2020 15:52

Line Num: 1

Text: HISTORY abdomen distended . referre from HCA for ascitis requiring tap REPORT Compared with previous film dated 02/12/2019. Both domes are elevated, likely related to underlying ascites. Possible small left basal pleural effusion. Some atelectasis/increased opacification in medial lower zones bilaterally with slightly prominent interstitial lines could be due to degree of interstitial oedema. No gross consolidation seen. Heart size is not well assessed in this AP projection. Report Indicator: Known / Minor Finalised by: <DOCTOR>

Accession Number: dcab18afccbe8ec5ea16349907c0b3ae77111c81ffb95be697f93731ce2bdb01

Updated Date Time: 24/1/2020 9:08

## Layman Explanation

The images show that the patient's abdomen is swollen, likely due to fluid buildup. There may be a small amount of fluid in the lungs on the left side. The lungs also show signs of fluid buildup in the lower areas, but there is no major infection. The size of the heart cannot be determined from these images.

## Summary

The text is extracted from a \*\*chest X-ray report\*\*.   
  
Here is a summary based on your questions:  
  
\*\*1. Diseases Mentioned:\*\*  
  
\* \*\*Ascites:\*\* The report mentions ascites, a condition where fluid builds up in the abdomen. It notes that the domes of the diaphragm are elevated, likely due to the ascites.  
\* \*\*Possible small left basal pleural effusion:\*\* This suggests the presence of a small amount of fluid in the left lower part of the chest cavity (pleural space).   
\* \*\*Atelectasis/Increased opacification:\*\* This indicates a collapse or partial collapse of lung tissue (atelectasis) with increased density in the medial lower zones of both lungs. The report attributes this to possible interstitial edema.  
\* \*\*Interstitial edema:\*\* This suggests fluid buildup in the tissues of the lungs.  
  
\*\*2. Organs Mentioned:\*\*  
  
\* \*\*Lungs:\*\* The report describes the lungs, mentioning atelectasis, opacification, interstitial lines, and pleural effusion.  
\* \*\*Diaphragm:\*\* The report notes that both domes of the diaphragm are elevated.  
\* \*\*Heart:\*\* The report states that the heart size is not well assessed in this AP (anterior-posterior) projection.  
  
\*\*3. Symptoms or Phenomena Causing Attention:\*\*  
  
\* \*\*Abdomen distended:\*\* This symptom was the reason for the patient being referred for the chest x-ray.   
\* \*\*Ascites:\*\* The presence of ascites is a concern and is likely the reason for the patient's distended abdomen.  
\* \*\*Pleural effusion:\*\* Though small, the pleural effusion could be a sign of underlying medical conditions.   
\* \*\*Atelectasis/Increased opacification:\*\* This could indicate a respiratory issue, which may require further investigation.  
\* \*\*Interstitial edema:\*\* This suggests a fluid buildup that may be related to various factors and warrants further assessment.