# Patient ID: 2689, Performed Date: 27/4/2015 2:19

## Raw Radiology Report Extracted

Visit Number: ca3166f756e2c9c1865990178d102a7c9dbc5fcd1dc0589163bddc9bd6b0b856

Masked\_PatientID: 2689

Order ID: f45a83e4f789ab5db353a4103da8142eae96278b202f69517da6556020c10f4a

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 27/4/2015 2:19

Line Num: 1

Text: HISTORY dry cough x 1/52 REPORT No previous chest radiographs are available for comparison. There is a large left pleural effusion associated with partial collapse of the left lung and obscuration of the entire left cardiac border. Mild tracheal deviation to the right is noted. Given a clinical history of previous malignancy (obtained from the patient’s electronic records), further imaging is suggested to ascertain its nature. No discrete pulmonary nodule or consolidation is seen in the right lung. Further action or early intervention required Reported by: <DOCTOR>

Accession Number: 49ba8847000fa9e54d76bf90e530e9a95d31a3da92b1d128243a0e0e0f763dc7

Updated Date Time: 27/4/2015 15:13

## Layman Explanation

The images show a large amount of fluid in the left side of your chest, causing part of your left lung to collapse. This is making it difficult to see the left side of your heart. The windpipe is slightly shifted to the right. Because you have a history of cancer, further imaging is recommended to determine the cause of the fluid. The right lung appears normal.

## Summary

Error generating summary.