# Patient ID: 4684, Performed Date: 24/12/2018 6:16

## Raw Radiology Report Extracted

Visit Number: b648ff125798b163a05f53aa7232a9d0d77338d45354fc66f4b508354ab193ed

Masked\_PatientID: 4684

Order ID: a7b27c70a20898e34fd300d73470610a84768fdbdbe9270aecb6e5d84d3d9d8b

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 24/12/2018 6:16

Line Num: 1

Text: HISTORY right pleural effusion s/p chest tube REPORT Compared with prior radiograph 20 December 2018, there is interval increase in size of the pneumothorax component of the right hydropneumothorax. This measures 2.2 cm in maximal apical pleural distance and associated with mediastinal shift towards the left. The tip of drainage catheter is at the lateral aspect of the right lower zone. There is underlying consolidation in the aerated right lung and right hilar lymphadenopathy. Multiple left tiny pulmonary nodules are again demonstrated, previously described as metastatic nodules. Heart size is normal. Further action or early intervention required Finalised by: <DOCTOR>

Accession Number: 65520c72d30716f4841970155b8cdfd02be902fe3be9b8155292553f491a4617

Updated Date Time: 25/12/2018 11:46

## Layman Explanation

The images show that the air pocket (pneumothorax) in your right lung has gotten bigger since your last X-ray. This has caused your heart to shift slightly to the left. The tube draining fluid from your lung is in the right place. There is also some fluid in the air sacs of your right lung and swollen lymph nodes in your right lung. Several small spots (nodules) were seen in your left lung. These were previously identified as possibly being spread from a different cancer.

## Summary

The text is extracted from a \*\*chest radiograph\*\*.  
  
\*\*1. Diseases mentioned:\*\*  
  
\* \*\*Pneumothorax:\*\* There is an interval increase in size of the pneumothorax component of the right hydropneumothorax. This measures 2.2 cm in maximal apical pleural distance and associated with mediastinal shift towards the left.   
\* \*\*Hydropneumothorax:\*\* The pneumothorax is a component of a right hydropneumothorax.  
\* \*\*Consolidation:\*\* There is underlying consolidation in the aerated right lung.  
\* \*\*Right hilar lymphadenopathy:\*\* Right hilar lymphadenopathy is present.  
\* \*\*Metastatic nodules:\*\* Multiple left tiny pulmonary nodules are again demonstrated, previously described as metastatic nodules.  
  
\*\*2. Organs mentioned:\*\*  
  
\* \*\*Right lung:\*\* There is underlying consolidation in the aerated right lung.  
\* \*\*Right pleura:\*\* There is an interval increase in size of the pneumothorax component of the right hydropneumothorax.  
\* \*\*Mediastinum:\*\* Mediastinal shift towards the left is associated with the pneumothorax.  
\* \*\*Heart:\*\* Heart size is normal.   
  
\*\*3. Symptoms or phenomenon that would cause attention:\*\*  
  
\* \*\*Increase in pneumothorax size:\*\* There is an interval increase in size of the pneumothorax component of the right hydropneumothorax.  
\* \*\*Mediastinal shift:\*\* The pneumothorax is associated with mediastinal shift towards the left.  
\* \*\*Right hilar lymphadenopathy:\*\* Right hilar lymphadenopathy is present.  
\* \*\*Metastatic nodules:\*\* Multiple left tiny pulmonary nodules are again demonstrated, previously described as metastatic nodules.  
\* \*\*Further action or early intervention required:\*\* This phrase highlights the need for prompt medical attention.