# Patient ID: 484, Performed Date: 07/8/2018 17:10

## Raw Radiology Report Extracted

Visit Number: b1c27d74b86bb0247f4449b029a06361b90b74a0f4b4574b6b975962a0c9e1e6

Masked\_PatientID: 484

Order ID: c3e22382d15ea91abee23be2b6c3da3ea84c40ffdfef1b771c04e5a4a368fd75

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 07/8/2018 17:10

Line Num: 1

Text: HISTORY Suspected resolving CAP REPORT Chest radiograph, PA erect Prior radiograph dated 18 Feb 2017 was reviewed. The heart is not enlarged. Intimal calcification is noted within the unfolded thoracic aorta. Airspace opacities are noted in the right lower zone, likely secondary to infective changes in the given the clinical context. Mild air space opacities at the right costophrenic may also represent infective changes. Increased density of the medial ® lower zone adjacent to the right heart may be due to middle lobe scarring from known bronchiectasis. Biapical pleural thickening is noted. Stable calcific density opacity projected over the left cardiac shadow likely corresponds to the calcified left breast nodule seen on previous CT Chest dated 2 Jan 2014. Degenerative changes are noted in the visualised spine and prior T12 vertebroplasty is noted. There is mild thoracolumbar scoliosis with convexity to the left. Further action or early intervention required Reported by: <DOCTOR>

Accession Number: ab88358be3f4a05b8a32a2ffdc2e18fad7d1b67852af081d5945b3105a00d765

Updated Date Time: 08/8/2018 12:04

## Layman Explanation

The chest x-ray shows some areas of inflammation in the right lower lung, likely from an infection. There is also thickening of the pleura (the lining of the lungs) in both upper lungs. The x-ray also shows signs of previous inflammation in the right middle lung and a calcified nodule in the left breast. The spine shows signs of aging and a previous procedure on the lower back. The spine also curves slightly to the left.

## Summary

The text is extracted from a \*\*Chest Radiograph\*\*.   
  
Here is a summary based on your guiding questions:  
  
\*\*1. Diseases:\*\*  
  
\* \*\*Resolving Community Acquired Pneumonia (CAP):\*\* Airspace opacities in the right lower zone and right costophrenic angle are likely secondary to infective changes, consistent with resolving CAP.  
\* \*\*Bronchiectasis:\*\* Increased density of the medial right lower zone adjacent to the right heart may be due to middle lobe scarring from known bronchiectasis.  
\* \*\*Degenerative Changes:\*\* Degenerative changes are noted in the visualised spine.  
\* \*\*Prior T12 Vertebroplasty:\*\* A prior T12 vertebroplasty is noted.  
\* \*\*Calcified Left Breast Nodule:\*\* Stable calcific density opacity projected over the left cardiac shadow likely corresponds to the calcified left breast nodule seen on a previous CT Chest.  
  
\*\*2. Organs:\*\*  
  
\* \*\*Heart:\*\* The heart is not enlarged.  
\* \*\*Thoracic Aorta:\*\* Intimal calcification is noted within the unfolded thoracic aorta.  
\* \*\*Lungs:\*\* Airspace opacities are noted in the right lower zone and right costophrenic angle. Increased density is noted in the medial right lower zone adjacent to the right heart.  
\* \*\*Spine:\*\* Degenerative changes are noted in the visualised spine. A prior T12 vertebroplasty is noted.   
\* \*\*Breast:\*\* Stable calcific density opacity projected over the left cardiac shadow likely corresponds to the calcified left breast nodule seen on a previous CT Chest.  
  
\*\*3. Symptoms or Phenomena:\*\*  
  
\* \*\*Airspace Opacities:\*\* Airspace opacities in the right lower zone and right costophrenic angle are likely secondary to infective changes.  
\* \*\*Increased Density:\*\* Increased density of the medial right lower zone adjacent to the right heart may be due to middle lobe scarring.  
\* \*\*Biapical Pleural Thickening:\*\* Biapical pleural thickening is noted.  
\* \*\*Thoracolumbar Scoliosis:\*\* There is mild thoracolumbar scoliosis with convexity to the left.  
  
\*\*Further Action or Early Intervention Required:\*\* The report states "Further action or early intervention required" but does not specify what actions are needed.