# Patient ID: 4864, Performed Date: 19/12/2015 15:14

## Raw Radiology Report Extracted

Visit Number: de02eea52ccda512bfff130c77902a28685bc24669b4e0117baf6cf21e38f825

Masked\_PatientID: 4864

Order ID: 83208cb362805013a18b9ef28b7d57e865d94604e07113a72036bd618b66f3fa

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 19/12/2015 15:14

Line Num: 1

Text: HISTORY recently treated for NSTEMI and HCAP REPORT Sternotomy wires and mediastinal surgical clips are noted. There is airspace shadowing in the left lower zone and left costophrenic angle - infection cannot be excluded. (Newfinding) There is pulmonary venous congestion without overt pulmonary oedema. The heart size and lung bases are difficult to assess due to suboptimal inspiratory effort. May need further action Finalised by: <DOCTOR>

Accession Number: 91d4c4ed1a8402f7d879fca291e34f9ed04d7d141ae1790bf3b2a3ce3ac37d2c

Updated Date Time: 20/12/2015 23:10

## Layman Explanation

Error generating summary.

## Summary

The text is extracted from a \*\*chest x-ray report\*\*.  
  
\*\*1. Disease(s):\*\*  
\* \*\*NSTEMI:\*\* The patient has a history of Non-ST-segment elevation myocardial infarction (NSTEMI).  
\* \*\*HCAP:\*\* The patient has a history of Healthcare-associated pneumonia (HCAP).  
\* \*\*Infection:\*\* The report mentions airspace shadowing in the left lower zone and left costophrenic angle, suggesting possible infection. However, it states that infection cannot be excluded.  
  
\*\*2. Organ(s):\*\*  
\* \*\*Lungs:\*\* Airspace shadowing in the left lower zone and left costophrenic angle, suggesting possible infection. Pulmonary venous congestion without overt pulmonary edema is noted.   
\* \*\*Heart:\*\* The report mentions the heart size being difficult to assess due to suboptimal inspiratory effort.  
\* \*\*Mediastinum:\*\* The report mentions the presence of mediastinal surgical clips.   
  
\*\*3. Symptoms or phenomenon that would cause attention:\*\*  
\* \*\*Airspace shadowing in the left lower zone and left costophrenic angle:\*\* This finding raises concern for possible infection.   
\* \*\*Pulmonary venous congestion:\*\* This suggests possible heart failure.  
\* \*\*Suboptimal inspiratory effort:\*\* This makes it difficult to assess the size of the heart and lung bases, potentially impacting the interpretation of the findings.