# Patient ID: 589, Performed Date: 18/11/2019 20:23

## Raw Radiology Report Extracted

Visit Number: 45a836ae58482e526a209a6e2c13143b1c43236ef4add3bd40669fde65a4c218

Masked\_PatientID: 589

Order ID: b398b2381e68e1271c723c49e4032607432005e458f3483fd4c33170ec047c18

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 18/11/2019 20:23

Line Num: 1

Text: HISTORY SOB REPORT AP SITTING The previous chest radiograph of 16/11/2019 is reviewed. Suboptimal inspiration is noted. The heart size cannot be accurately assessed as the left heart border is obscured. There is mural calcification of the unfolded thoracic aorta. Bilateral diffuse reticulonodular opacities are again seen, consistent with known interstitial pulmonary disease, largely stable since October 2019. Increased airspace opacities are noted in the left mid-lower zone,possibly early infective change. Lung volumes are reduced. There is no pneumothorax or pleural effusion. An old non-united left mid-clavicular fracture is noted. Report Indicator: Further action or early intervention required Reported by: <DOCTOR>

Accession Number: 579f2927ba561e1f925c34bcc07b2a765d0d921b6987a205f3c6b3c5cc938e19

Updated Date Time: 19/11/2019 10:22

## Layman Explanation

Error generating summary.

## Summary

Error generating summary.