# Patient ID: 1731, Performed Date: 07/8/2016 6:52

## Raw Radiology Report Extracted

Visit Number: 6f023d7db7d15d56ee9a20d72d7cac51f92d2f65f7a4f7780ab26f5e2d5a793c

Masked\_PatientID: 1731

Order ID: 5e67c071d900d1d05727e44b464b607b341ba7cbddbbc19fb60890b1b9f47e2b

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 07/8/2016 6:52

Line Num: 1

Text: HISTORY paravalvular leak -mvr REPORT Compared with prior radiograph of 05/8/16. Sternotomy wires and prosthetic heart valves are seen. A single lead cardiac pacemaker is insitu. Bilateral pleural effusions (including a loculated fissural component of effusion on right) are grossly unchanged. Atelectatic changes are seen in the lung bases. No new confluent consolidation is seen. May need further action Finalised by: <DOCTOR>

Accession Number: c57ecb1e82f3b144dd329d2eb7b9017ce02cf29015225428743b55da3f413f1f

Updated Date Time: 10/8/2016 16:26

## Layman Explanation

The images show the metal wires used in your previous heart surgery and the artificial heart valves. There is also a device called a pacemaker in place. The fluid build-up around your lungs is about the same as before. The lower parts of your lungs show some collapse, but there are no signs of new infection.

## Summary

## Radiology Report Summary  
  
\*\*Image Type:\*\* Chest X-ray  
  
\*\*1. Disease(s):\*\*   
  
\* \*\*Paravalvular leak:\*\* This term is mentioned in the history section, indicating a potential issue with a heart valve. However, the report doesn't provide further details or mention if this is a current concern.   
\* \*\*Atelectatic changes:\*\* This indicates collapsed or airless lung tissue, likely at the lung bases. The report mentions no new confluent consolidation, suggesting the atelectasis is not a new development and may be a pre-existing condition.   
\* \*\*Bilateral pleural effusions:\*\* This indicates the presence of fluid in the space between the lungs and the chest wall. The report notes this is unchanged from a previous X-ray and includes a specific mention of a loculated fissural component of the effusion on the right side.   
  
\*\*2. Organ(s):\*\*  
  
\* \*\*Heart:\*\* The report mentions prosthetic heart valves and a single lead cardiac pacemaker.   
\* \*\*Lungs:\*\* The report focuses on the lungs, describing atelectatic changes, pleural effusions, and the absence of new confluent consolidation.   
\* \*\*Pleura:\*\* Bilateral pleural effusions are noted.   
  
\*\*3. Symptoms or Concerns:\*\*  
  
\* \*\*Unchanged pleural effusions:\*\* While the effusions are present, they are not worsening, which might be a positive sign.   
\* \*\*Atelectatic changes:\*\* While not a new development, this could indicate a potential underlying respiratory issue.   
\* \*\*"May need further action":\*\* This statement suggests that the radiologist believes further investigation or treatment may be necessary. The specific reason for this statement is not elaborated in the report.   
  
\*\*Overall:\*\* The report suggests that the patient has pre-existing conditions including atelectasis and bilateral pleural effusions, which are unchanged from a previous imaging study. While no new concerning findings are noted, the radiologist indicates that further action may be required. The report does not provide information about the paravalvular leak, so it is unclear if this is a current concern or a past history.