# Patient ID: 1731, Performed Date: 30/7/2016 17:52

## Raw Radiology Report Extracted

Visit Number: 6f023d7db7d15d56ee9a20d72d7cac51f92d2f65f7a4f7780ab26f5e2d5a793c

Masked\_PatientID: 1731

Order ID: 30ac85236ebf91b41e1b26499edeff958cd11a8526df5e93265b760ced868006

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 30/7/2016 17:52

Line Num: 1

Text: HISTORY . post ppm insertion. REPORT CHEST (AP SITTING MOBILE) TOTAL OF ONE IMAGE The previous chest radiograph of 20 July 2016 at 05:49 a.m. was reviewed with the report. In the current chest radiograph is compared to the previous radiograph as cited above, the following are noted: 1. There has been insertion of a single chamber AICD / pacemaker with the generator over the left chest wall. The tip of the pacing electrode is over the right ventricular area.The temporary pacing wire has been removed. 2. Perihilar vascular congestion has developed. 3. There is increase in size of the bilateral basal pleural effusions, especially on the right side. 4. The opacification in the right perihilar and middle zone area is unchanged. May need further action Finalised by: <DOCTOR>

Accession Number: 60827eb7b04f5952fc90271156a8aaf4e5cea52c0c2e075020d02a6b9bc71116

Updated Date Time: 03/8/2016 12:56

## Layman Explanation

This report compares your current chest x-ray to a previous one taken on July 20, 2016. It shows that:  
  
\* A device called a pacemaker has been placed in your chest, with the leads going to your heart.  
\* There is increased fluid around the blood vessels in your lungs.  
\* There is more fluid in the spaces between your lungs and the chest wall, especially on the right side.  
\* There is an area of thickening in your right lung that hasn't changed since your last x-ray.

## Summary

The text is extracted from a \*\*chest radiograph (AP sitting mobile)\*\*.  
  
Here is a summary based on your guiding questions:  
  
\*\*1. Diseases mentioned:\*\*  
  
\* \*\*NIL\*\* - The report does not explicitly mention any diseases. It describes findings that could be associated with various conditions, but does not provide a diagnosis.   
  
\*\*2. Organs mentioned:\*\*  
  
\* \*\*Chest wall:\*\* The report notes the insertion of an AICD/pacemaker generator over the left chest wall.  
\* \*\*Right ventricle:\*\* The tip of the pacing electrode is located over the right ventricle.  
\* \*\*Perihilar:\*\* The report mentions perihilar vascular congestion.  
\* \*\*Bilateral basal pleural:\*\* The report notes an increase in the size of bilateral basal pleural effusions, especially on the right side.   
\* \*\*Right perihilar and middle zone:\*\* The report mentions opacification in this area, which is unchanged compared to the previous radiograph.   
  
\*\*3. Symptoms or phenomenon causing attention:\*\*  
  
\* \*\*Perihilar vascular congestion:\*\* This suggests increased blood flow in the area around the hilum of the lung, which can be caused by various factors including heart failure, pulmonary hypertension, or infection.   
\* \*\*Increase in size of bilateral basal pleural effusions, especially on the right side:\*\* Pleural effusions are collections of fluid in the space between the lung and the chest wall. An increase in size may suggest worsening of an underlying condition.  
\* \*\*Opacification in the right perihilar and middle zone area:\*\* This indicates a denser area in the lung, which could be due to pneumonia, atelectasis, or other causes. The report notes that this finding is unchanged, which might indicate a stable condition.  
  
\*\*Important Note:\*\* This is a summary based on the provided text. It is crucial to remember that radiographic reports are not diagnoses. A radiologist should interpret the findings and provide a diagnosis based on the clinical context.