# Patient ID: 649, Performed Date: 14/1/2019 20:17

## Raw Radiology Report Extracted

Visit Number: 7d80d6520ab2e32eb11c88460287d1e1772534dd7d7480b6398178ee9c79ba1a

Masked\_PatientID: 649

Order ID: 9d5a711e21343549782a54e46a8b79665fd2786035c0569b1b39b3100c667fa9

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 14/1/2019 20:17

Line Num: 1

Text: HISTORY chest pain REPORT Chest radiographs of 12/12/18 and 03/11/18 are reviewed. Midline sternotomy wires and vascular clips noted. No confluent consolidation, pleural effusion or pneumothorax is seen. Opacities over theleft side scapular body may represent bony islands. Spondylotic changes of the visualised spine are noted, stable. Known / Minor Reported by: <DOCTOR>

Accession Number: c4cfc30509029cc71c4698f956cd5c78a17a33f607f998a7207eb3eadba0b9e8

Updated Date Time: 15/1/2019 12:18

## Layman Explanation

The X-ray images of your chest from December 12, 2018 and March 11, 2018 were reviewed. There are no signs of pneumonia, fluid buildup around the lungs, or collapsed lung. There are some areas of increased density on the left side of your back, which may be normal bone. There are some age-related changes in your spine, but they are not causing any problems.

## Summary

## Analysis of Radiology Report  
  
\*\*Image Type:\*\* Chest radiographs  
  
\*\*1. Diseases Mentioned:\*\*  
  
\* \*\*Spondylotic changes:\*\* The report mentions "spondylotic changes of the visualized spine". Spondylosis is a condition that involves the degeneration of the spine.   
\* \*\*NIL:\*\* No other disease names are explicitly mentioned in the report.  
  
\*\*2. Organs Mentioned:\*\*  
  
\* \*\*Lungs:\*\* The report mentions "no confluent consolidation, pleural effusion or pneumothorax is seen," indicating the lungs are being assessed.  
\* \*\*Spine:\*\* The report notes "spondylotic changes of the visualized spine."   
\* \*\*Scapula:\*\* The report mentions "opacities over the left side scapular body."  
  
\*\*3. Symptoms or Phenomenon of Concern:\*\*  
  
\* \*\*Chest pain:\*\* The report mentions "chest pain" as the history. This is the primary reason for the imaging.  
\* \*\*Opacities over the left scapular body:\*\* The report states that "opacities over the left side scapular body may represent bony islands." This could indicate a potential abnormality in the scapular region, requiring further investigation.  
\* \*\*Spondylotic changes:\*\* Although the report states the changes are "stable," spondylosis can be a source of pain and discomfort.   
  
\*\*Additional Information:\*\*  
  
\* \*\*Midline sternotomy wires and vascular clips:\*\* This suggests a history of thoracic surgery.   
\* \*\*Stable:\*\* This is used in relation to the spondylotic changes, meaning they have not worsened.   
\* \*\*Known/Minor:\*\* This indicates that the findings are likely pre-existing and not of major concern.  
  
\*\*Overall:\*\*  
  
The report describes a stable, pre-existing condition of spondylosis in the spine. While opacities over the left scapular body are noted, they may be benign. Further investigation may be needed to determine their nature. The patient's chest pain is the primary concern.