# Patient ID: 832, Performed Date: 12/12/2015 15:03

## Raw Radiology Report Extracted

Visit Number: b8e8d1f23ba3085a9e5667d1ae9d2dc0fb56915c6629499fbede0664cc342f44

Masked\_PatientID: 832

Order ID: f9866d6a14290a2fa4996c2f6edd65e2ee4c7b2241f15d0f63c02f6d9904c8ad

Order Name: Chest X-ray

Result Item Code: CHE-NOV

Performed Date Time: 12/12/2015 15:03

Line Num: 1

Text: HISTORY serratia bacteremia Lt-IJV dvt IDA for scopes REPORT The heart is enlarged. There is suboptimal inspiratory effort. It is difficult to assess lung bases. There is pulmonary venous congestion. Alveolar infiltrates may be present in the left costophrenic angle. There is a right CVP line in situ with the tip projected over the right atrium Known / Minor Finalised by: <DOCTOR>

Accession Number: 65711dd0e97ac28fb318ef6713c57e177fb1800d555c312ffba982a316f13afc

Updated Date Time: 14/12/2015 18:17

## Layman Explanation

The images show that your heart is larger than normal. It's also difficult to see the bottom parts of your lungs because you didn't take a deep enough breath. There is fluid build-up in the blood vessels of your lungs. There may be signs of infection in the lower left part of your lungs. There is a tube in place in your right chest, positioned over your heart.

## Summary

The text is extracted from a \*\*chest x-ray\*\* report.  
  
Here's a summary based on your guiding questions:  
  
\*\*1. Diseases mentioned:\*\*  
  
\* \*\*Serratia bacteremia:\*\* This is a bacterial infection mentioned in the patient's history.  
\* \*\*Left Internal Jugular Vein Deep Vein Thrombosis (Lt-IJV DVT):\*\* This is a blood clot in the left internal jugular vein, also mentioned in the patient's history.   
\* \*\*IDA for scopes:\*\* This likely refers to "Intravenous Dye Administration" for endoscopic procedures, a procedure done in the past and not related to a disease.  
  
\*\*2. Organs mentioned:\*\*  
  
\* \*\*Heart:\*\* The report states that the heart is enlarged.  
\* \*\*Lungs:\*\* The report mentions difficulty assessing the lung bases and pulmonary venous congestion. Alveolar infiltrates are possibly present in the left costophrenic angle.  
\* \*\*Right Atrium:\*\* The report mentions a right CVP line in situ with the tip projected over the right atrium.   
  
\*\*3. Symptoms or phenomenon that would cause attention:\*\*  
  
\* \*\*Enlarged heart:\*\* This can be a sign of various heart conditions and requires further investigation.  
\* \*\*Suboptimal inspiratory effort:\*\* This suggests the patient may not be able to take a deep enough breath for a clear x-ray. This could be due to pain or other factors.   
\* \*\*Difficulty assessing lung bases:\*\* This could be due to poor inspiration, but it also suggests potential abnormalities at the lung bases, which require further investigation.  
\* \*\*Pulmonary venous congestion:\*\* This indicates a backup of blood in the pulmonary veins, which could be caused by heart failure or other issues.  
\* \*\*Alveolar infiltrates:\*\* These are areas of fluid or inflammation in the alveoli (air sacs) of the lungs. They can be a sign of pneumonia, infection, or other conditions. This finding requires further evaluation.   
\* \*\*Right CVP line in situ:\*\* This is a central venous catheter placed in a large vein in the chest, which is likely being used for medication administration or monitoring.   
  
\*\*Important Note:\*\* This summary is based on the limited information provided in the text. It is crucial to understand that a radiology report is just one part of the overall clinical picture and should be interpreted by a qualified medical professional in conjunction with other clinical findings and patient history.