# Patient ID: 913, Performed Date: 12/2/2018 13:01

## Raw Radiology Report Extracted

Visit Number: c91924b6785a38c5a5d59f25d23d6a9f2fcee28fabc1148ad2aeb6df545f6b85

Masked\_PatientID: 913

Order ID: c3c5bebcc5c6fab4e907e655f9957d33b631e8246eecc16219fb4e2f25415b29

Order Name: Chest X-ray, Erect

Result Item Code: CHE-ER

Performed Date Time: 12/2/2018 13:01

Line Num: 1

Text: HISTORY SOB cough fever REPORT The prior chest radiograph (from KTPH) dated 09/06/10 was reviewed. The heart size is within normal limits. The thoracic aorta is unfolded. There are patchy airspace opacities in bilateral perihilar regions. Given the clinical context, an underlying infective process should be considered. No pleural effusion or pneumothorax detected. May need further action Reported by: <DOCTOR>

Accession Number: a419b3c23a608515232b5b086beb922b7b66311d511ba383af99c74af6723fbe

Updated Date Time: 12/2/2018 17:29

## Layman Explanation

Error generating summary.

## Summary

## Analysis of Radiology Report:  
  
\*\*Image Type:\*\* Chest X-ray (CXR)  
  
\*\*1. Diseases Mentioned:\*\*  
  
\* \*\*NIL\*\* - While the report suggests an "underlying infective process", it does not name a specific disease.   
  
\*\*2. Organs Mentioned:\*\*  
  
\* \*\*Heart:\*\* Size is within normal limits.  
\* \*\*Thoracic Aorta:\*\* Unfolded (meaning it appears normal).  
\* \*\*Lungs:\*\* "Patchy airspace opacities in bilateral perihilar regions" are noted. This is indicative of fluid or inflammation in the lung tissue.  
\* \*\*Pleura:\*\* No pleural effusion (fluid buildup in the space between the lung and the chest wall) or pneumothorax (collapsed lung) detected.  
  
\*\*3. Symptoms/Concerns:\*\*  
  
\* \*\*SOB (Shortness of Breath):\*\* This is a significant symptom, often associated with lung problems.  
\* \*\*Cough:\*\* Another common symptom of lung issues.  
\* \*\*Fever:\*\* Can be a sign of infection.  
\* \*\*Patchy airspace opacities:\*\* These are areas of abnormal density in the lungs, which can be caused by various conditions, including infection, inflammation, or fluid buildup.  
\* \*\*"Given the clinical context, an underlying infective process should be considered."\*\* This statement highlights the doctor's suspicion that the patient might have an infection.  
  
\*\*Summary:\*\*  
  
The CXR shows evidence of patchy opacities in the lung tissue, suggestive of an inflammatory process. The clinical history of SOB, cough, and fever further supports this suspicion. However, the report does not diagnose a specific disease and suggests further investigation.