

Imaging – Chest and Ribs

| X-Ray Indications: | X-Ray Not Indicated Routinely: |
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| <ul style="list-style-type: none"> • Suspected lung cancer - haemoptysis • >3weeks-chest &/or shoulder pain • Dyspnoea • Weight • Chest signs • Hoarseness • Finger clubbing • Cervical/supraclavicular lymphadenopathy • Cough • Features suggestive of metastatic disease from a lung primary • Underlying chronic respiratory problems with unexplained change in existing symptoms • Suspected TB fatigue, fever, night sweats, weight loss • Chest infection not resolving on treatment • Undiagnosed pleuritic chest pain • Increasing/unexplained SOB • Suspected pulmonary embolus • Suspected pleural effusion (Ultrasound may also be useful in distinguishing pleural fluid from thickening) • Unexplained increased C reactive Protein • Unexplained Erythema nodosum | <ul style="list-style-type: none"> • Chest trauma (? rib fracture) – CXR for severe/penetrating injury only • COPD/Asthma follow up – unless signs or symptoms have changed • Heart disease/Hypertension – except following clinical change • Infection/cough/wheeze in children • Pre-operative • Routine follow-up in the absence of clinical deterioration (unless otherwise advised by the radiologist) • Screening medical – unless specific employment related risk • Upper respiratory tract infection. • Suspected costo-chondritis. |

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